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INTERVIEWING LOW-INCOME RESPONDENTS

A Preliminary View*

CAROL H. WEISS**

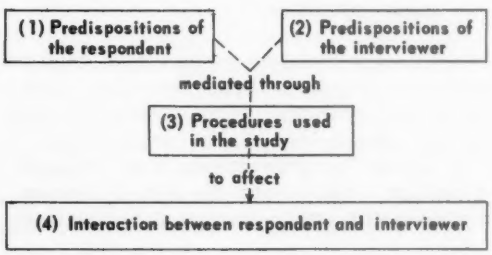
Studies of the poor, in common with most social science research, tend to rely on the personal interview. In recent years, however, a number of people have questioned the worth of the information collected. They suspect the poor of conning the interviewer, the interviewer of biasing or misunderstanding the respondent, and the resultant data of being a meaningless mélange. We know a good bit, from 40 years of methodological study, about the limitations of the interview as a way of capturing reality. Indications are that it is a particularly "leaky receptacle" for carrying questions out and answers back when dealing with respondents of low socioeconomic status.

I should like to consider a few prevalent notions about ways in which low-income people differ from other respondents, ways that make it harder to get valid answers from them. Then I shall look at the results of some studies that have a bearing on the issue. Through this kind of analysis of the relevant literature, sparse as it is, (and there are relatively few studies that present systematic information), we may begin to derive some insight into the nature and extent of the interviewing problem with low-income people.

A definition of "low-income" is in order. In general, my concern is with the unskilled, marginally employed, or unemployed, the public assistance client--the member of the underclass rather than the stable, blue-collar working class. However, I have not always been able to maintain such a distinction because many studies lump together working-class and lower-class populations, and a few provide only inferential reference to social class at all.

It is obvious that low-income people are not a homogeneous group, and that there are important differences in subgroups by racial and ethnic background, by rural-urban residence, by age and sex and education, by orientation to middle-class, working-class, or lower-class values, and similar factors. In time, I hope that systematic analysis can reveal differences in response to interviewing that stem from such characteristics. But for now, I shall have to limit the discussion to whichever groups appear in the literature.

Let us look first at the process by which error may arise in an interview. Error may derive from four interrelated sources:


(1) Predispositions of the respondent
(2) Predispositions of the interviewer
mediated through
(3) Procedures used in the study
to affect
(4) Interaction between respondent and interviewer

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* *Presented at the twenty-first annual conference of the American Association for Public Opinion Research, Swampscott, Mass., May 1966.*

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We can identify some hypotheses about ways in which poor people will be more difficult subjects than other groups--although, of course, other groups are not immune from interview bias.

Predispositions of the lower-class respondent may involve such factors as these:

He is harder to locate and contact.

He is suspicious or hostile to research, its auspices, or its purposes.

He is suspicious or hostile to the group (whites, social workers, etc.) from which the interviewer comes.

He is indifferent and unmotivated to cooperate.

He lacks information on the subject under inquiry.

He lacks self-insight, perspective, cognitive skills.

His language ability is limited.

He misunderstands the role of respondent, reinterprets it in more familiar terms (e.g., client-to-public assistance investigator, suspect-to-inquisitor, host-to-guest) and applies inappropriate norms.

He is acquiescent or deferential to others or to authority in general.

He wishes to present himself or his group in socially desirable terms, or perhaps in socially expected terms.

He wants to conceal damaging information (because it is ego-damaging, because it violates norms, or would incur penalties).

The interviewer on his side may be less conscientious about contacting lower-class respondents, less willing to walk through the streets, halls, or stairways of low-income neighborhoods and make the necessary call-backs. He may be uncomfortable with lower-income people and shy away from confrontations with "immorality and squalor." He may be unable to establish rapport with them. Or he may be so intent on establishing rapport that he slights the interviewing task. He may lack understanding of lower-class life and fail to understand what is said. He may have strong opinions on the subjects under study. Perhaps, above all, he may have stereotyped expectations of what poor people are like and what they will say.

The interaction between respondent and interviewer can be a futile attempt at communication. The social distance, the differences in expectations, in language, in understanding, and in style, may produce responses that are distorted or empty of all meaning.

This is obviously the extreme statement. Let us now look at four of the hypotheses that have been advanced and marshall what data we can find to support or refute them. The four hypotheses are:

1. Low-income people are harder to locate.
2. They tailor their responses to what they believe society wants to hear.
3. They know little about research, care less, and are not motivated to respond accurately.
4. They lack the language--and perhaps the thought processes embodied in language--to abstract and generalize, to explain motives, and to describe personal feelings and relationships.

Unavailability

At the simplest level, the problem is defined as unavailability--the difficulty in locating and contacting the respondent. The Census Bureau estimates that the 1960 Census seriously underenumerated certain groups, particularly nonwhite males. The Bureau's analysis gives a "quite rough" estimate that nonwhite men were undercounted by 16 percent in the age group 25-44 and by 13 percent in the age group 45-64. This compares with an underenumeration of the total population of about 2 percent. Negro women, too, were more likely to be missed than were

white women. (Taeuber and Hansen, 1963.) To the extent that being Negro bears a relationship to low income, difficulties in locating respondents can be inferred--although the 1960 evidence refers only to this subgroup. The quality check of the 1950 Census showed directly that the "lower the socioeconomic status of a person, the higher was the likelihood that he was missed." (Hurwitz and Pritzker, 1954.)

The Central Harlem Adult Survey conducted in 1964, which encountered problems in the listing and location of housing units as well as in contact, had an interview completion rate of only 63 percent. Comparison with 1960 Census figures revealed that the uninterviewed were heavily concentrated in the lowest income category (under $3,000 a year). The National Opinion Research Center interviewers reported the persistent feeling that people were reluctant to answer the doorbell. (Haryou-Act, Inc., 1965.)

Other studies, however, report that initial contact with low-income respondents is no more difficult than with higher-income respondents. (Olendzki, 1965; Greenleigh Associates 1965a,b.) Interview completion rates of 98 percent have been reported with extremely disadvantaged groups.

Panel studies encounter special problems because respondents move around. Thirty-seven percent of the New York City welfare recipients in one study moved in the year between the first and second interviews. (Olendzki, 1965.) Another interview study of poor Negro families in Baltimore found that 74 percent of the families in the slums moved during the three-year study period--from one to seven times. (Wilner, Walkley, Pinkerton, Tayback, 1962.)

Much of the difficulty in locating respondents is obviously a function of the way the sample is drawn. If residents of housing units are designated for interview, particularly if no specification is made of which member of the household is to be interviewed, problems are not usually severe--although the Census experience cautions against smugness on this score. There may be an invisible stratum at the very lowest level. When names of specific individuals are drawn from records, or re-interviews are required, assiduous field work may be called for.

A further point about contact is the matter of time orientation. Gordon reports that her deprived Negro respondents resisted "being committed to a place and time. When asked if a particular time would be convenient the respondent frequently said, 'Well--why don't you just come around.' If you found them they could be interviewed, but often they were just not there." She attributes this attitude to their difficulties in planning ahead in a life riddled with crises and possibly, as well, to the irrelevance of clock schedules for husbandless and unemployed women. (Gordon, 1965.) Other research has demonstrated the relative insignificance of time to many low-income and less urbanized groups. Interviewing that relies on prior appointments can be a frustrating task.

Tailoring Response to Authority

The poor person is likely to have had considerable experience with the lower-echelon functionary--the lower-middle-class official who represents, and imposes, an alien way of life. He is badgered and managed by the rent collector, the policeman, the public assistance worker, the teacher, the shopkeeper, the truant officer, the employment manager. His experience with officials bearing forms has been negative. He is tired of being questioned and investigated.

His response to the research interviewer, according to this view, is likely to be evasive and noncommittal, or, since he has often learned to manipulate the system that manipulates him, opportunistic--he will give the kinds of answers he thinks that society, through the interviewer, wants to hear. Particularly when the topic of inquiry is one where candid response would jeopardize benefits or incur penalties, distortion is expected.

This view is not directly concerned with personal interaction between respondent and interviewer. In the usual concept of personal interaction, the respondent is assumed to assess the specific

situation and adjust his response in accordance with what he perceives to be the appropriate role vis-á-vis the particular interviewer. This view, in distinction, assumes that the respondent tends to see the interviewer undifferentiatedly as an ambassador from "Them" out there, and tailors his responses to perceived norms of the larger society--possibly with special reference to the petty officialdom he knows best and which represents society to him.

Adjustment of response to the larger social context rather than to the individual interviewer appears to apply in Bruce Dohrenwend's study of psychological disorder. His Negro respondents did not respond differently to Negro and white interviewers, but they showed some tendency to underreport undesirable neuropsychiatric symptoms to all interviewers. The author conjectures that "perhaps, at this time of increased striving toward greater equality within the value framework of the wider society, the Negroes may be more likely...to suppress admission of symptoms they judge socially undesirable." (Dohrenwend, 1966.)

What then do low-income people misreport? At the most prosaic level, Caplovitz reports that in 1963 families on public assistance in New York were apt to claim that their household appliances were acquired as gifts--even when this was not true--because of their fear that disclosure of purchase of such items would violate that city's welfare department rules. (Caplovitz, 1963.)

David, checking public assistance reports against records, found that out of 46 respondents in a midwestern county three erroneously denied receiving payments. Twenty-six percent understated their income from public assistance by more than 30 percent; the more they received in public assistance payments, the more likely they were to underreport the amounts. The reporting bias resulted in approximately 20 percent total underreporting of income by public assistance recipients. (David, 1962.) Twenty years earlier Bancroft found that in Philadelphia "...5 percent of the families currently on relief had told the enumerators that they were no longer receiving relief and only 3 percent of the families said they had never received relief." (Bancroft, 1940.) On the other hand, when asked about registration at the State Employment Office, over a fourth of the unemployed workers who had not registered claimed that they had.

If we take the question of divulging public assistance further back in time--to a period when social mores about its acceptability were probably different--we find that in Columbus, Ohio, in 1932 about eight out of every nine families receiving city relief reported it. (Ohio Commission on Unemployment Insurance, 1933, cited in Neely, 1937.)

It is a commonplace of interviewing that when "interviewed directly concerning behavior about which there is a strong expectation of social approval or disapproval, and in which there is considerable ego-involvement, respondents tend to err in the direction of idealizing their behavior." (Maccoby and Maccoby in Lindzey, ed., 1954.) On some topics, low-income people seem less driven to scrub up the picture they present for the world to see. A study of handicapped persons in the Minneapolis-St. Paul area compared work histories obtained from interviews with employers' records. White-collar workers, and particularly skilled blue-collar workers, showed marked tendencies to upgrade their job titles and duties, but unskilled and service workers showed little tendency to upgrade. (Weiss, Dawis, England, and Lofquist, 1961.)

Several investigators have been impressed with the candor of reports on illegitimacy. In a Cook County study of AFDC families, almost 70 percent of the sample of 1,010 women interviewed reported one or more illegitimate children. (Greenleigh, 1960.) The study even claims that there is "some evidence that the amount of illegitimacy and number of fathers may be overstated,"--although the only evidence cited, that "some mothers admitted that they had made up names of putative fathers to protect the real father," does not appear very conclusive.

Probably the greatest difficulty in making coherent sense out of lower-class biases in reporting is our own ignorance of the salient values of lower-class groups

and of the images of themselves that they are most concerned to present. They admit receiving public assistance but understate the amount. They report illegitimacy and juvenile delinquency but probably not drug addiction. They overreport seeking work but do not upgrade their work history. Their reporting of illness and hospitalization appears about as unreliable as everyone else's.

Part of the problem undoubtedly rests with the fragmentary nature of the information available. There are important disparities in the subgroups from whom it was collected, as well as the place and time. Differences in the procedures used in the studies certainly have an impact. If it is a little early in this paper for the reference to The Need for Further Research, note still must be taken of the enormous gaps in the literature.

In any event, there is not much evidence at present for the image of the badgered lower-class person manipulating the interview to outwit bureaucracy. He seems little more given to outright distortion--and perhaps less--than the middle-class respondent protecting his status. Certainly some bias exists, but many investigators report pleasant surprise at the openness of low-income respondents and their willingness to talk frankly, even on sensitive topics.

Low Motivation: Arising From Perception of Research

Lack of motivation on the part of the low-income respondent may be at least as serious--maybe more serious--than conscious distortion. One source of low motivation might be his perception of the research enterprise.

It is likely that lower-income people, especially those with limited education, have little understanding of what research is all about. If they cooperate willingly, it often appears to be because of the intrinsic pleasure of speaking to a sympathetic listener, or of talking back to society. But the need of research for fact, for "truth," for the most valid information available, is apt to be unrecognized. (This no doubt applies to large segments of other social groups as well.)

Where knowledge and interest in research are lacking, respondents may be indifferent to what they convey as well as to whether they contribute any information at all. The heavy doses of "I don't know" responses in many low-income interviews may reflect not only real "not knowing" but also apathy in the face of seemingly reasonless demands. There is also persuasive evidence that low-income respondents are more inconsistent and unreliable in their reports. (Lenski & Leggett, 1960; Freedman, n.d.; Kohn & Carroll, 1960.)

In some cases, respondents doubt the given reasons for the study and suspect other, sinister purposes. Hyman mentions the suspicions of some respondents that NORC survey interviewers were working for the F.B.I. (Hyman, Cobb, Feldman, Hart, Stember, 1954, p. 186.)

Opinions about study auspices may color response. When the same study is introduced under different sponsorships, respondents are sometimes differentially motivated. Residents of northern India reported more worries about taxes to interviewers from a foreign university than they did to interviewers from an Indian government research institute. (Ralis, 1958.) Germans under post-war American occupation gave different poll responses to the American Military Government and to a fictitious German Opinion Institute. (Crespi, 1950.) In these cases the presumed purposes to which the information would be put were a potent factor in affecting responses. If the public welfare department or the employment service sponsors a study, respondents may imagine the threat of immediate sanctions. Or they may have negative attitudes toward some particular sponsor and cooperate minimally, if at all.

On a somewhat different level, poor people may occasionally view research with cynicism because they see it as a substitute for action. Congressional hearings on the poverty program were addressed on several occasions by people who complained that they had been studied to death. When, they asked, was something going to be done?

It is hard to gauge the effects of lack of commitment to research. Perhaps the

most convincing evidence that it influences response comes from studies that validate interview data against records. There is a frequent association between accurate response and education. (Weiss, Dawis, England, Lofquist, 1961; Lansing, Ginsburg, Braaten, 1961, U.S. Public Health Service, 1961.) In a study of cash borrowing, education correlated positively with accuracy, even while income correlated negatively with accuracy. The authors state, "It seems reasonable to suppose, therefore, that as the level of education of a group of respondents increases it is more possible for the investigators to appeal to favorable attitudes toward research and research sponsors." (Lansing et al., p. 197.)

Language

Differences in language structure and meaning have been identified as a potential problem in interviewing the poor. At a simple level, this involves different interpretations of words. In her study of blue-collar wives, Komarovsky found that a question on whether your husband ever "surprised you" always signified to them a gift not an act, "help" meant money, "quarrel" was interpreted as very violent, "talk" meant a long discussion, "pleased with yourself" implied being conceited or "stuck on yourself." (Komarovsky, 1964.)

At a somewhat higher level of complexity, differences in language reflect different patterns of perceiving and thinking. Observers have described the low-income person's concentration on the specific and the concrete and his difficulties with abstractions (e.g., Riessman, 1962).

In a comparison of taped interviews with ten upper-class and ten lower-class white Arkansans on their experiences during a tornado, Schatzman and Strauss found that there were considerable disparities between the classes in their ability to see things from different perspectives and to clarify experiences. Lower-class respondents almost without exception described events as seen through their own eyes. They did not assume the role of another or take different perspectives. Moreover, they were relatively insensitive to the interviewer and his lack of understanding and congruent imagery. They assumed that their perceptions represented reality and they felt little need to explain, qualify, or illustrate. They were particularly sparse with motivational themes, evidently assuming that it was quite clear why people did what they did. Unlike higher-class respondents, they neither explained nor elaborated on the reasons for their behavior. Regarding generalizations about groups of persons or entire organizations, they were "relatively or even wholly inarticulate." They spoke in particularistic terms, almost never in classifications. Their notions of the organizational structure of the community were rudimentary.

The authors emphasize that for the lower-class respondent, the interview with a middle-class interviewer involves cross-class communication. He is used to talking about personal experiences only to listeners who share a great deal of experience and symbolism with him and with whom he can safely assume that words and gestures are assigned similar meanings. But in the interview, these assumptions break down.

They raise the question of whether the lower-class person actually perceives in abstract and classificatory terms but is unable to mobilize the verbal skills to convey his perceptions across class lines. Tentatively they conclude "that speech does in some sense reflect thought," and that the multiple perspectives and generalizing skills common to the middle class are likely to be absent.* (Schatzman and Strauss, 1955; also, revised, in Adams and Preiss, eds., 1960.)

Bernstein carries the analysis of lower-class language usage further. (Bernstein, 1964, reprinted in Riessman,

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** Riessman, who listened to the same tapes, offers a different--motivational--interpretation. He says that for many of the respondents, the problem they wanted to discuss with the interviewer was why the disaster had hit and why it killed those it did and spared others. When the interviewer refused to discuss this issue, they resignedly gave minimum information and made no attempt to put themselves in the listener's place. (Riessman, 1964, quoted in Richardson, Dohrenwend, Klein, 1965.)*

Cohen, Pearl, eds., 1964). He distinguishes between the elaborated code of the middle and upper classes and the restricted code of much of the lower working class. The restricted code assumes shared interests and identifications and a cultural identity held and accepted by members of the group. The child who learns the restricted code perceives language not as a medium for communicating the experience of separateness and difference, not as a means "for a voyage from one self to another," but as a relatively impersonal signalling of the concrete here and now. The intent of others is taken for granted. There is little need to elaborate on the unique experience of the individual. The code strengthens solidarity with the group by restricting signalling of personal differences, abstract relationships, or feelings and motivations.

To the extent that lower-class speech corresponds to this formulation, the implications for the interview are important. Respondents will demonstrate not only simplified speech structure and a narrow range of vocabulary, but difficulty in separating individual experiences out of the common cultural frame. Generalized and abstract questions will elicit little meaningful response. Attempts to collect information on intent, purpose, and values--unless questions are very carefully constructed--will founder on issues of meaning. For the future of social research, it will be important to discover to what extent, and with what groups, such a restricted lower-class speech code obtains.

I am particularly struck by the observation that lower-class respondents are not sensitive to the reactions of the listener (which Komarovsky, too, illustrates). This runs counter to much previous commentary. If respondents lack the psychic mobility for putting themselves in another's place, if they assume congruent perceptions of identifications, interests, and motives, then does it lead to the expectation that they will be relatively immune to biasing effects of the interviewer? They may be aware of social norms in broad terms, but may in personal interaction be susceptible to none but the grossest cues of another individual. The possibilities that this holds true, even in activities more laden with social sanctions than living through a tornado, seem worth exploring.

Conclusion

We do not have an adequate base of systematic data from which to draw any firm conclusions on interviewing techniques. Whole issues are untouched, such as the working researcher's primary concern--the effect of different study procedures on response. Except for studies of the differential responses to Negro and white interviewers and one or two other matters, there has been little rigorous investigation. And most of the best of what there is, such as the series by the Bureau of Economic and Business Research at the University of Illinois, is concerned only peripherally with low-income people.

It is chastening, too, to realize how little study has been made of the actual behavior of participants in an interview. For example, one observer reports that it is impossible to find out what specific acts are subsumed under the label, "establishing rapport." Let us add to the list for future research the need for a few rigorous analyses of words, gestures, and acts of respondent and interviewer--and the effects of different patterns on response.

In the meantime, the tentative impression is not one of error run rampant. The fragmentary data we have on the responses of the poor in the interview are not as bleak as some have supposed, although they are certainly not as good as we would like. Work is needed to further identify, measure, and control error in interviewing low-income people. But contrary to some diagnoses, it appears that the interview is by no means an inappropriate tool.

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Households and Families Headed by Women in 1966

In March 1966, about 11.6 million (20 percent) of the 58.1 million households in the United States were headed by women, according to a recent report by the Bureau of the Census.

The increase in the number of female-headed households of about 26 percent was over 2.5 times the 10 percent increase in the total number of households. The larger number of households headed by women 55 years old or over accounted for most of the increase in this category. About 19 percent of all nonwhite households were headed by women compared with about 7 percent of all white households. In about 3.0 million households, the female head was of child-bearing age, i.e., under 45 years of age.

Between 1960 and 1966, the number of primary families (two or more persons related by blood, marriage, or adoption and residing together) headed by women increased by about 522,000 to a total of about 5.0 million.

The Census report ("Households and Families, by Type; 1966." *Current Population Reports*. Series P-20, No. 152) also shows that the average size of the U.S. family in 1966 was 3.72 persons, slightly higher than the 3.67 average in 1960.

Copies of the report are available from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C., 20402, at 15¢ a copy.

Age Differentials for AFDC Children by Status of Father

To be eligible for the Aid to Families with Dependent Children program a child must be deprived of care or support of a parent because of the parent's death, disability, unemployment, or absence from the home. The parent's absence may result from divorce or separation, desertion, the child having been born out of wedlock, or absence may be an enforced separation due to a parent's imprisonment. While deprivation relating to either parent may render a child eligible for assistance, the great majority of AFDC children (97 percent according to the 1961 national study) are found to be eligible because of the father's death, disability, absence, or unemployment.

The specific status of the father in relation to the child's deprivation tends to define a unique recipient population in each instance; this is partly demonstrated in the chart which presents an age profile based on age-specific rates for the children in each of the status-of-father groups.[1]

Each status-of-father group has a distinctive age distribution which is strongly suggestive of the social processes involved for the group in entry into and exit from the program. The children with father dead tend to be relatively old (median - 12.7 years); this is largely a residual group, since in recent years most orphans have been protected by Old Age and Survivors Disability Insurance (OASDI) or other insurance and now seldom need AFDC. Children of incapacitated fathers also tend to be older (median - 9.8 years), probably resulting both from the fact that disability increases with age and from the recently increasing protection of disability insurance. Children of divorced or legally separated parents also tend to be older (median - 10.0 years). The youngest children are those of imprisoned fathers (median - 5.9 years), unmarried parents (median - 6.2 years), and unemployed fathers (median - 6.4 years). The children of deserting fathers and of other separated parents are average in age (both groups have a median of 8.4 years).

For the child of unmarried parents, the family is already "broken" when he is born, so such children tend to be quite young on entering the program. Imprisoned fathers, like the unemployed group, probably tend to be relatively young, and therefore their children are relatively young. Certain other misfortunes, such as death or disability of the father or divorce of the parents, are probably more likely to befall older children.

For all groups there is a notable dropoff in the recipient rate at age 17, and for most this is also true at age 16, probably indicating that many of the children are not helped or persuaded to remain on the program and continue their education up to at least age 18.

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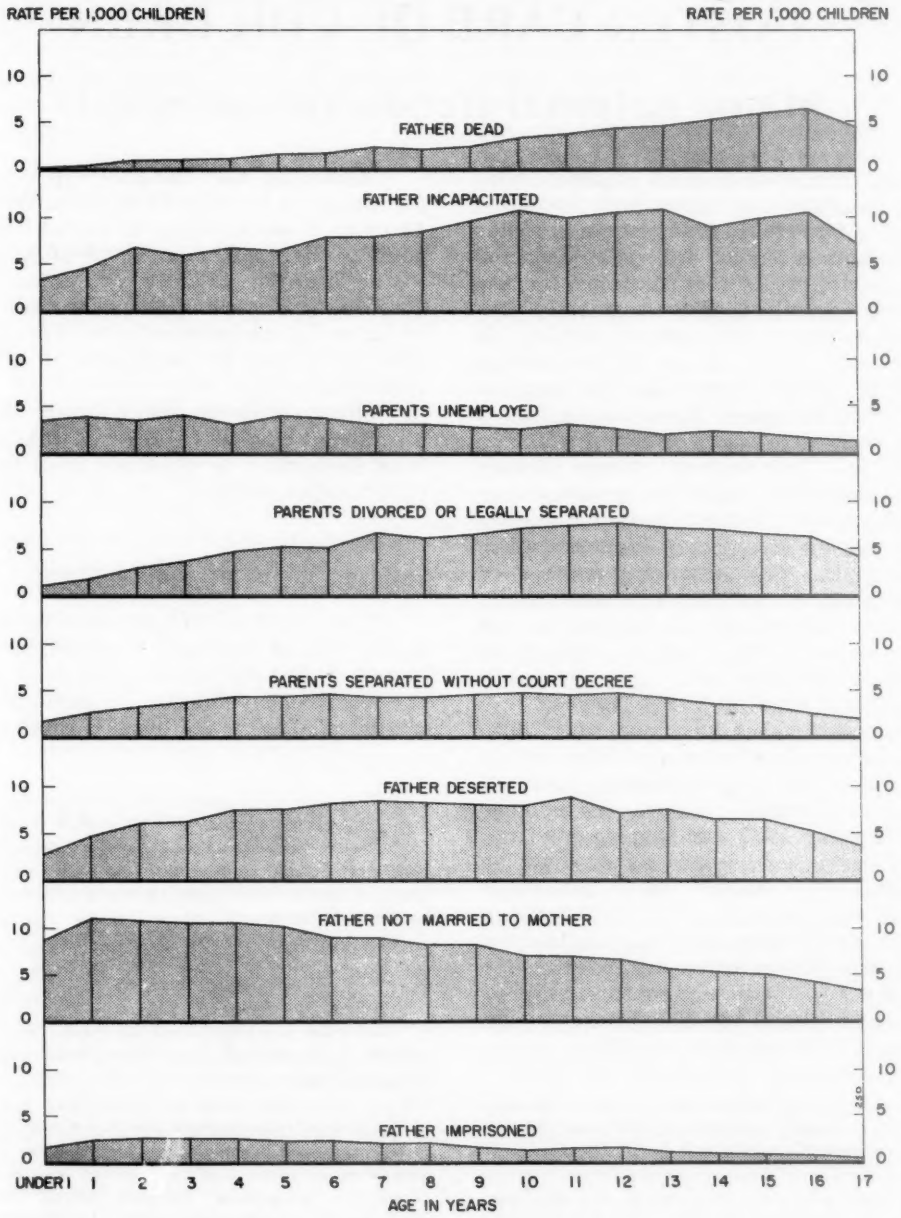
[1] *The profiles are not based directly on the age distribution of children in each of the eight groups. In order to remove the effect of a varying population base, each curve was developed by distributing the total recipient rate at each year of age according to the distribution of recipients by father status category at that age. The resulting profiles are theoretically those that would obtain for recipient children if the base population were the same for every year up to age 18.*

STATUS OF FATHER GROUP PROFILES, BASED ON DISTRIBUTION OF AGE-SPECIFIC AFDC RECIPIENT RATES: 1961



FOSTER CARE OF CHILDREN

Major national trends and prospects

An estimated 287,200 children were living in foster care throughout the United States on March 31, 1965, either in foster family homes served by social agencies or in child welfare institutions for neglected, dependent, and emotionally disturbed children. The rate of children in foster care was 4.0 per 1,000 children under 18 years of age in the U.S. population. This estimate does not include a large, but unknown, number of children living in "independent" foster family homes who were placed by parents, relatives, or others without the assistance of a social agency. Nor does it include a much smaller, but also unknown, number of children placed directly in foster family homes by juvenile courts (a practice that occurs to a significant extent only in a few States) or placed by other agencies that do not report to the Children's Bureau.

In recent years the number of children in foster care has been increasing slowly but steadily. This rise followed a period of decline. As Table 1 shows, the number dropped after 1933 and that year's level was only reached again as recently as 1961-62.[1] The foster care rate also dropped substantially after 1933 but has been slowly moving upwards in the last few years. The 1965 rate is two-thirds the 1933 rate. If the 1933 rate had continued to prevail, an additional 136,000 children would have been in foster care in 1965.

Assuming that the rate will continue to change in the direction and at the pace at which it was changing during the 1961-65 period, the total number of children in foster care in 1975 is projected to be 364,000, a 27 percent increase over 1965 or an annual increase of about 2 percent.[2] The 1975 rate is estimated at 4.7 per 1,000 children.

Since trends in foster family and institutional care have differed markedly, it is necessary to consider each type of care independently.

Children in foster family homes

The number of children in foster family homes on March 31, 1965, is estimated at 207,800, a rate of 2.9 per 1,000 children.[3] There has been a steady growth in the number of children in this type of

[1] *The statistics used here are estimates of the number of children in care as of one day in the year. The total number cared for during the year is considerably larger, of course, because of the movement of children in and out of care. Some believe this movement is more rapid today than formerly, attributing the reduction in average length of stay to long-run changes in the reasons why children enter foster care.*

[2] *This estimate is based on the Bureau of the Census Series B projection of the 1975 population. The Bureau has issued four population projections. To show the variability attributable to these differing projections, below are the estimates of the number of children in foster care in 1975 under each:*

Series A	*385,400*
Series B	*364,000*
Series C	*341,900*
Series D	*322,200*

The foster care projections in this report are designed to show the possible outcome of current trends and are not necessarily forecasts.

[3] *Children living in group homes are counted under foster family care in order to maintain comparability with data for earlier years. A uniformly agreed upon definition of the term "group home" has been lacking. The Children's Bureau estimate of the number of children in group homes in 1965 (1,800 children) is therefore uncertain because of this lack.*

care, unaffected since 1933 by the decline noted above. As a result the 1965 estimate is almost double the 1933 figure. Although the rate also has been going up in recent years, its current level is not substantially changed from 1933. By 1975 an estimated 302,100 children (3.9 per 1,000) will be living in foster family homes, a 45 percent increase over 1965 or an annual increase of about 4 percent.

Children in institutions

An estimated 79,400 children were living in child welfare institutions for neglected, dependent, and emotionally disturbed children on March 31, 1965, a rate of 1.1 per 1,000 children. Institutional care has been declining steadily and substantially, although its rate of decline appears to have slowed down. The 1965 estimate is 45 percent below 1933 and a further decline to 61,900 by 1975 is projected. Such a decline will represent a 22 percent drop from 1965 or an annual decrease of about 2 percent.

As a result of these divergent trends in foster family and institutional care, the proportion of foster children who live in foster family homes is expected to rise from 72 percent in 1965 to 83 percent in 1975, while the proportion in institutions will decline from 28 to 17 percent.

Foster care under public and voluntary auspices

Foster care is provided by public and voluntary agencies and institutions. Since patterns of service have been dissimilar, it is necessary to consider each auspice independently.

Of the 287,200 children in foster care on March 31, 1965, 173,900 (61 percent) were under the direct care of public, and 113,300 (39 percent) were under the direct care of voluntary, agencies and institutions.[4] Foster family care, however, is predominantly public (78 percent public, 22 percent voluntary) while institutional care is predominantly voluntary (86 percent voluntary, 14 percent public).

Foster care under public auspices, in terms of both numbers and rates, has risen consistently throughout the period under review. Voluntary care, on the other hand, has declined, the number of children in this type of care in 1965 being 36 percent below the 1933 level. In more recent years, voluntary care has stabilized, although its rate continues to fall very slowly.

By 1975 public foster care is expected to serve 264,600 children, an increase of 52 percent over 1965 or an annual increase of about 4 percent. Voluntary care will decline moderately to 99,400. These changes will result in a further enlargement of the public sector of foster care service from 61 percent in 1965 to 73 percent in 1975.

Public foster family care is expected to increase from 162,800 in 1965 to 255,600 in 1975 (57 percent). Only a slight increase from 45,000 to 46,500 (3 percent) is projected for voluntary foster family care. Of all children in foster family care, the proportion who are cared for under public auspices will rise from 78 to 85 percent.

The number of children in both public and voluntary institutions is expected to decline but the decline in the voluntary will be greater than in the public. The number of children in public institutions has remained stable in recent years and is expected to decline only slightly from 11,100 to 9,000. The number in voluntary institutions has also been fairly stable but some further decline from 68,300 to 52,900 is projected. In 1975 the proportion of children in institutions who reside in voluntary institutions will be practically the same as it is at present (86 percent).

Of all children in foster care under public auspices in 1965, 94 percent were in foster family homes and 6 percent in institutions. By 1975 the proportions will be 97 percent and 3 percent, respectively. Of the children cared for under voluntary auspices in 1965, 40 percent were in foster family homes and 60 percent in institutions. By 1975 these percentages will be 47 and 53, respectively.

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[4] *In addition to children under their direct care, public agencies also purchase care for many children from voluntary agencies and institutions. These children are included in the 113,300 under the care of voluntary agencies and institutions.*

Foster care in the States: 1965

Foster care rates vary greatly among States, from a high of 11.4 per 1,000 children in the District of Columbia to a low of 1.8 in Mississippi. (U.S. average = 4.0)[5] States ranking in the highest quartile have an aggregate rate of 6.2 compared with 2.3 for States in the lowest quartile. Among regions, the Northeast has the highest rate (5.4), followed by the West (4.3) and lastly by the North Central region and the South (3.4 each).[6] Thirty-nine percent of all children in foster care are provided care by agencies in five States (California, Illinois, Ohio, New York and Pennsylvania).[7] These States contain 34 percent of the nation's children.

Foster family care rates range from 7.2 per 1,000 children in the District of Columbia to 0.6 in Texas (U.S. average = 2.9). States ranking in the highest quartile have an aggregate rate of 4.9 compared with 1.3 for those in the lowest quartile. The rate is highest in the Northeast (3.9), which is closely followed by the West (3.7). Substantially lower rates are found in the North Central region (2.5) and the South (2.1).

Rates of institutional care range from 4.2 per 1,000 children in the District of Columbia to 0.0 in Utah (U.S. average = 1.1).[8] States ranking in the highest quartile have an aggregate rate of 1.3 compared with a rate of 1.0 for those in the lowest quartile. Again, the rate is highest in the Northeast (1.5), which is closely followed by the South (1.3). Lower rates are found in the North Central region (0.9) and the West (0.6).

In general, individual State rankings on foster family care bear practically no relationship to their rankings on institutional care.

Summary

Assuming a continuation of trends prevailing from 1961-65, we may expect, during the decade ending in 1975, an increasing number and rate of children in foster care, a continuing shift in type of service from institutional to foster family care, and a continuing shift in auspices from voluntary to public service.[9] Projections are useful for planning but are hazardous and necessarily tentative. They require frequent reappraisal as new data become available to determine whether the underlying assumptions remain valid or require revision in the light of emerging forces.

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[5] *State data are presented in Table 4 and Figure 3. The District of Columbia preferably should be compared with cities of comparable size. Data for cities are not available.*

[6] *The low rate in the North Central region may be due to the greater prevalence in this region of direct placement of children by juvenile courts.*

[7] *The percentage may be even larger since information for California is incomplete.*

[8] *Utah reported no children in institutions for dependent and neglected children.*

[9] *For a fuller discussion of trends in institutional care (much of which is applicable to foster family care) see "America's Children and Youth in Institutions, 1950-1960-1964," Children's Bureau publication No. 435 (1965).*

figure 1 CHILDREN IN FOSTER FAMILY CARE AND IN CHILD WELFARE INSTITUTIONS FOR NEGLECTED, DEPENDENT, AND EMOTIONALLY DISTURBED CHILDREN, by type of care, United States, selected years 1933-65 and projections to 1975

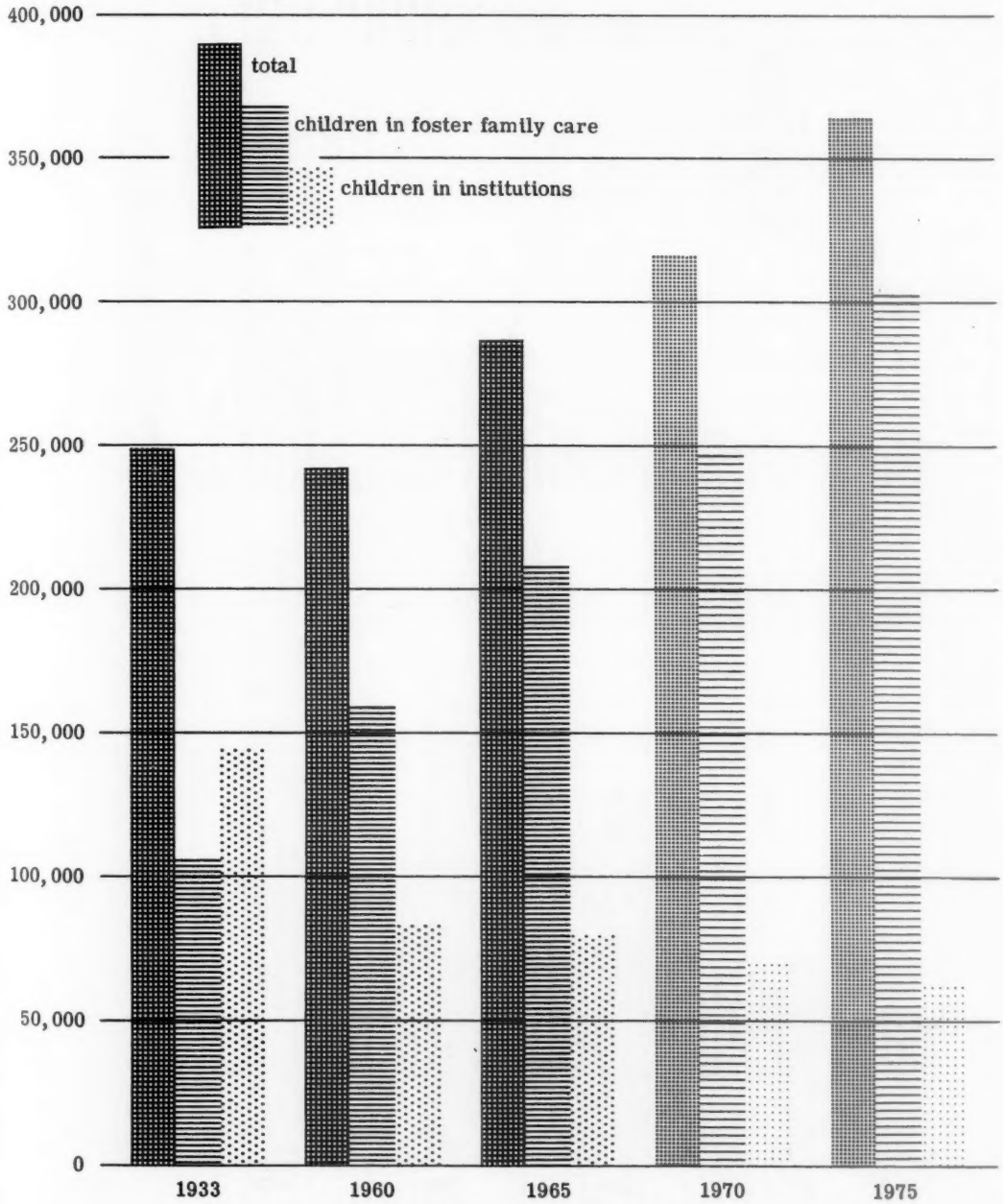


figure 2 CHILDREN IN FOSTER FAMILY CARE AND IN CHILD WELFARE INSTITUTIONS FOR NEGLECTED, DEPENDENT, AND EMOTIONALLY DISTURBED CHILDREN, by auspices of care, United States, selected years 1933-65 and projections to 1975

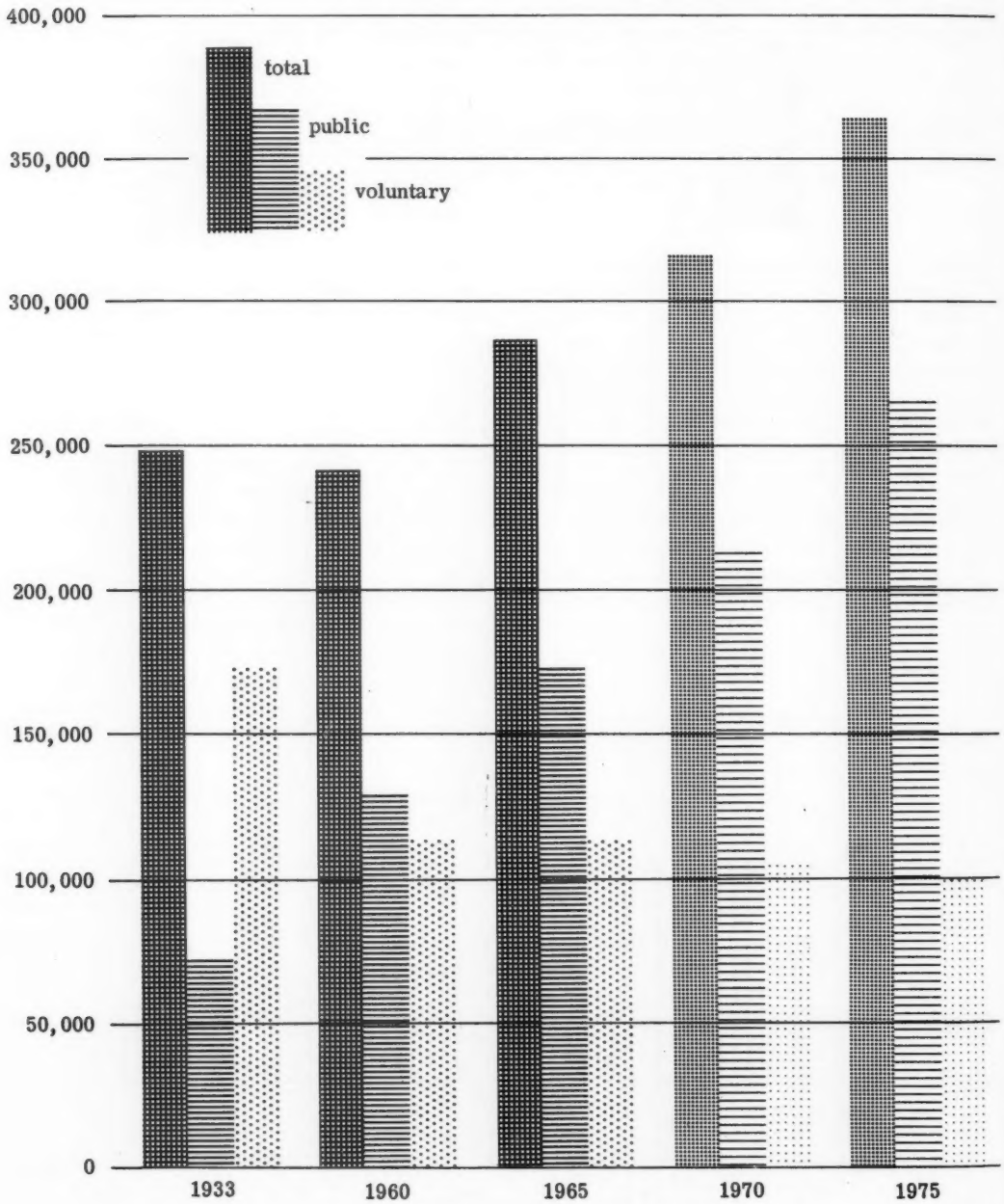
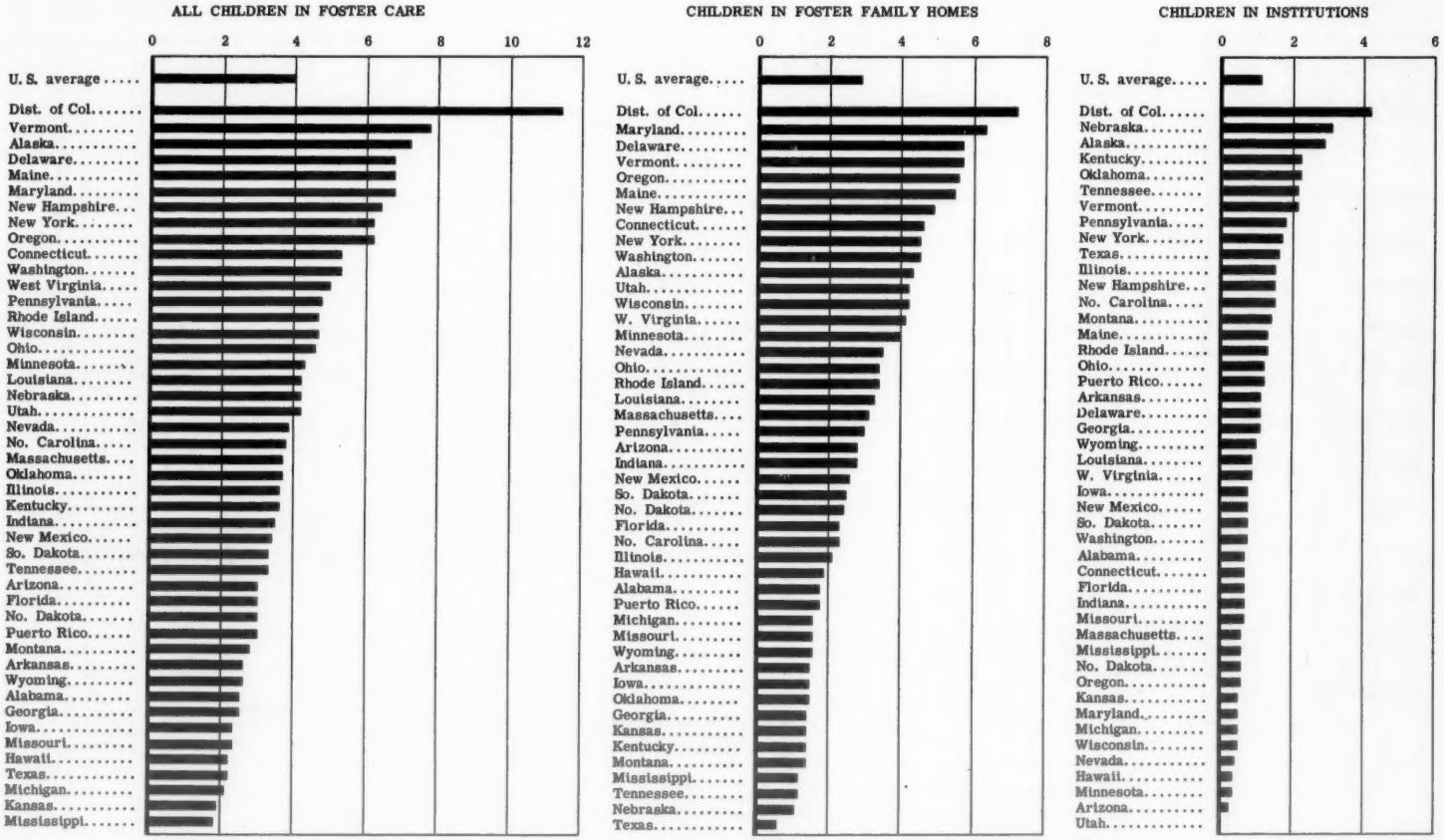


figure 3 STATE RANKINGS BY RATES OF CHILDREN IN FOSTER CARE UNDER PUBLIC AND VOLUNTARY AUSPICES, by type of care, 1965 1/

(rate per 1,000 children under 18 years of age)



1/ See Table 4. Excludes California, Idaho, New Jersey, South Carolina, and Virginia for which information reported is incomplete.

TABLE 1

Children in Foster Family Care and in Child Welfare Institutions for Neglected, Dependent, and Emotionally Disturbed Children: Number and Rate per 1,000 Children under 18 Years of Age, by Auspices of Agency, United States, Selected Years 1933-65 and Projections to 1975[1]

Year	Total				Children in foster family care				Children in institutions			
	Total		Public	Voluntary	Total		Public	Voluntary	Total		Public	Voluntary
	Number	Rate	Number	Number	Number	Rate	Number	Number	Number	Rate	Number	Number
1933.....	[2] 249,000	5.9	[2] 72,000	[2] 177,000	[2] 105,000	2.5	[2] 49,000	[2] 56,000	144,000	3.4	23,000	121,000
1950.....	([3])	([3])	([3])	([3])	([3])	([3])	([3])	([3])	95,000	2.0	18,000	77,000
1952.....	([3])	([3])	([3])	([3])	127,900	2.5	91,800	36,100	([3])	([3])	([3])	([3])
1958.....	231,600	3.7	117,300	114,300	143,500	2.3	106,400	37,100	88,100	1.4	10,900	77,200
1960.....	241,900	3.7	129,000	112,900	158,900	2.4	117,800	41,100	83,000	1.3	11,200	71,800
1961.....	246,500	3.7	133,300	113,200	164,200	2.5	122,300	41,900	82,300	1.2	11,000	71,300
1962.....	257,900	3.8	145,000	112,900	176,200	2.6	133,300	42,900	81,700	1.2	11,700	70,000
1963.....	262,300	3.7	149,300	113,000	182,500	2.6	138,500	44,000	79,800	1.1	10,800	69,000
1964.....	275,000	3.9	162,200	112,800	194,300	2.7	151,300	43,000	80,700	1.2	10,900	69,800
1965.....	287,200	4.0	173,900	113,300	207,800	2.9	162,800	45,000	79,400	1.1	11,100	68,300
.....	-------	---	-------	-------	-------	---	-------	-------	-------	---	-------	-------
1970.....	316,500	4.3	212,400	104,100	247,100	3.4	202,600	44,500	69,400	0.9	9,800	59,600
1975.....	364,000	4.7	264,600	99,400	302,100	3.9	255,600	46,500	61,900	0.8	9,000	52,900

[1] National estimates prepared by the Children's Bureau. Figures for 1933 and 1950 are for 49 States; those for other years are for 53 jurisdictions including Alaska, Puerto Rico and the Virgin Islands. Figures for recent years would be only slightly lower if these four States were excluded.

[2] Includes children in adoptive homes.

[3] Not available.

TABLE 2

Children in Foster Family Care and in Child Welfare Institutions for Neglected, Dependent, and Emotionally Disturbed Children: Percentage Distribution by Type of Care, United States, Selected Years 1933-65 and Projections to 1975[1]

Year	Total	Children in foster family care	Children in institutions	Year	Total	Children in foster family care	Children in institutions
1933.....	100.0	42.2	57.8	1963.....	100.0	69.6	30.4
1950.....	(2)	(2)	(2)	1964.....	100.0	70.6	29.4
1952.....	(2)	(2)	(2)	1965.....	100.0	72.4	27.6
1958.....	100.0	62.0	38.0	.....	-----	-----	-----
1960.....	100.0	65.7	34.3	1970.....	100.0	78.1	21.9
1961.....	100.0	66.6	33.4	1975.....	100.0	83.0	17.0
1962.....	100.0	68.3	31.7				

[1] See Table 1 for numbers of children.

[2] Not available

TABLE 3

Children in Foster Family Care and in Child Welfare Institutions for Neglected, Dependent, and Emotionally Disturbed Children: Percentage Distribution by Auspices of Agency, United States, Selected Years 1933-65 and Projections to 1975[1]

Year	Total			Children in foster family care			Children in institutions		
	Total	Public	Voluntary	Total	Public	Voluntary	Total	Public	Voluntary
1933.....	100.0	28.9	71.1	100.0	46.7	53.3	100.0	16.0	84.0
1950.....	(2)	(2)	(2)	(2)	(2)	(2)	100.0	18.9	81.1
1952.....	(2)	(2)	(2)	100.0	71.8	28.2	(2)	(2)	(2)
1958.....	100.0	50.7	49.3	100.0	74.1	25.9	100.0	12.4	87.6
1960.....	100.0	53.3	46.7	100.0	74.1	25.9	100.0	13.5	86.5
1961.....	100.0	54.1	45.9	100.0	74.5	25.5	100.0	13.4	86.6
1962.....	100.0	56.2	43.8	100.0	75.7	24.3	100.0	14.3	85.7
1963.....	100.0	56.9	43.1	100.0	75.9	24.1	100.0	13.5	86.5
1964.....	100.0	59.0	41.0	100.0	77.9	22.1	100.0	13.5	86.5
1965.....	100.0	60.5	39.5	100.0	78.3	21.7	100.0	14.0	86.0
.....	-----	-----	-----	-----	-----	-----	-----	-----	-----
1970.....	100.0	67.1	82.9	100.0	82.0	18.0	100.0	14.1	85.9
1975.....	100.0	72.7	27.3	100.0	84.6	15.4	100.0	14.5	85.5

[1] See Table 1 for numbers of children.

[2] Not available.

[3] Not available.

TABLE 4

Children in Foster Family Care and in Child Welfare Institutions for Neglected, Dependent, and Emotionally Disturbed Children, Number and Rate per 1,000 Children under 18 Years of Age, by Auspices of Agency, by State, 1965

State	Total				Children in foster family care	
	Total		Public	Voluntary	Total	
	Number	Rate	Number	Number	Number	Rate
United States estimated total	287,200	4.0	173,900	113,300	207,800	2.9
Alabama	3,395	2.5	2,373	1,022	2,444	1.8
Alaska	782	7.2	463	319	463	4.3
Arizona	1,955	3.0	1,662	293	1,808	2.8
Arkansas	1,891	2.6	1,108	783	1,113	1.5
California	(2)	(2)	20,728	(2)	(2)	(2)
Colorado	(2)	(2)	(2)	(2)	(2)	(2)
Connecticut	5,183	5.3	4,085	1,098	4,519	4.6
Delaware	1,307	6.8	846	461	1,100	5.7
Dist. Columbia	3,063	11.4	2,681	382	1,936	7.2
Florida	6,014	3.0	3,929	2,085	4,673	2.3
Georgia	4,271	2.5	2,328	1,943	2,408	1.4
Hawaii	613	2.2	485	128	523	1.9
Idaho	(2)	(2)	240	(2)	(2)	(2)
Illinois	13,546	3.6	5,341	8,205	8,034	2.1
Indiana	6,299	3.5	5,214	1,085	5,006	2.8
Iowa	2,298	2.3	1,503	795	1,480	1.5
Kansas	1,511	1.9	930	581	1,098	1.4
Kentucky	4,290	3.6	1,771	2,519	1,651	1.4
Louisiana	5,974	4.2	4,676	1,298	4,656	3.3
Maine	2,477	6.8	1,958	519	2,016	5.5
Maryland	8,973	6.8	7,764	1,209	8,293	6.3
Massachusetts	6,862	3.7	4,935	1,927	5,775	3.1
Michigan	6,641	2.1	1,418	5,223	5,135	1.6
Minnesota	5,806	4.3	4,743	1,063	5,447	4.0
Mississippi	1,735	1.8	1,139	596	1,176	1.2
Missouri	3,652	2.3	2,147	1,505	2,605	1.6
Montana	754	2.8	548	206	389	1.4
Nebraska	2,261	4.2	526	1,735	595	1.1
Nevada	643	3.9	633	10	583	3.5
New Hampshire	1,517	6.4	1,078	439	1,174	4.9
New Jersey	(2)	(2)	(2)	(2)	(2)	(2)
New Mexico	1,521	3.4	1,057	464	1,181	2.6
New York	36,833	6.2	14,718	22,115	26,703	4.5
North Carolina	6,968	3.8	4,016	2,952	4,226	2.3
North Dakota	763	3.0	422	341	604	2.4
Ohio	17,554	4.6	14,108	3,446	12,887	3.4
Oklahoma	3,201	3.7	1,751	1,450	1,337	1.5
Oregon	4,141	6.2	3,257	884	3,764	5.6
Pennsylvania	18,995	4.8	6,332	12,663	11,852	3.0
Puerto Rico	3,572	3.0	2,874	698	2,169	1.8
Rhode Island	1,451	4.7	1,104	347	1,047	3.4
South Carolina	(2)	(2)	(2)	(2)	(2)	(2)
South Dakota	901	3.3	613	288	689	2.5
Tennessee	4,643	3.3	2,358	2,285	1,634	1.2
Texas	8,854	2.2	1,848	7,006	2,327	0.6
Utah	1,795	4.2	1,071	724	1,795	4.2
Vermont	1,132	7.8	762	370	824	5.7
Virgin Islands	231	11.5	210	21	143	7.1
Virginia	(2)	(2)	7,058	(2)	(2)	(2)
Washington	5,683	5.3	3,726	1,957	4,878	4.5
West Virginia	3,290	5.0	2,724	566	2,668	4.1
Wisconsin	7,390	4.7	5,913	1,477	6,525	4.2
Wyoming	339	2.6	272	67	203	1.6

[1] Report incomplete. [2] Not reported.

TABLE 4

Children in Foster Family Care and in Child Welfare Institutions for Neglected, Dependent, and Emotionally Disturbed Children, Number and Rate per 1,000 Children under 18 Years of Age, by Auspices of Agency, by State, 1965

State	Children in foster family care--Continued		Children in institutions			
	Public	Voluntary	Total		Public	Voluntary
	Number	Number	Number	Rate	Number	Number
United States estimated total.....	162,800	45,000	79,400	1.1	11,100	68,300
Alabama.....	2,373	71	951	0.7	-	951
Alaska.....	463	-	319	2.9	-	319
Arizona.....	1,662	146	147	0.2	-	147
Arkansas.....	1,108	5	778	1.1	-	[1] 778
California.....	20,728	([2])	3,023	([2])	-	[1] 3,023
Colorado.....	1,827	([2])	([2])	([2])	([2])	([2])
Connecticut.....	3,982	537	664	0.7	103	561
Delaware.....	846	254	207	1.1	-	207
Dist. Columbia....	1,801	135	1,127	4.2	880	247
Florida.....	3,623	1,050	1,341	0.7	306	[1] 1,035
Georgia.....	2,236	172	1,863	1.1	92	1,771
Hawaii.....	485	38	90	0.3	-	90
Idaho.....	240	([2])	([2])	([2])	-	([2])
Illinois.....	5,056	2,978	5,512	1.5	[1] 285	5,227
Indiana.....	4,610	396	1,293	0.7	604	[1] 689
Iowa.....	1,052	428	818	0.8	451	367
Kansas.....	898	200	413	0.5	32	381
Kentucky.....	1,324	327	2,639	2.2	447	2,192
Louisiana.....	4,564	92	1,318	0.9	112	[1] 1,206
Maine.....	1,915	101	461	1.3	43	418
Maryland.....	7,724	569	680	0.5	40	640
Massachusetts.....	4,935	840	1,087	0.6	-	1,087
Michigan.....	1,418	3,717	1,506	0.5	-	1,506
Minnesota.....	4,743	704	359	0.3	-	359
Mississippi.....	1,139	37	559	0.6	-	559
Missouri.....	2,060	545	1,047	0.7	87	960
Montana.....	366	23	365	1.4	182	183
Nebraska.....	384	211	1,666	3.1	142	1,524
Nevada.....	573	10	60	0.4	60	-
New Hampshire.....	1,078	96	343	1.5	-	343
New Jersey.....	6,632	([2])	([2])	([2])	([2])	([2])
New Mexico.....	1,057	124	340	0.8	-	340
New York.....	14,718	11,985	10,130	1.7	-	10,130
North Carolina....	4,016	210	2,742	1.5	-	2,742
North Dakota.....	422	182	159	0.6	-	159
Ohio.....	11,232	1,655	4,667	1.2	2,876	1,791
Oklahoma.....	1,221	116	1,864	2.2	530	1,334
Oregon.....	3,257	507	377	0.6	-	377
Pennsylvania.....	6,277	5,575	7,143	1.8	55	7,088
Puerto Rico.....	2,169	-	1,403	1.2	705	698
Rhode Island.....	921	126	404	1.3	183	221
South Carolina....	1,360	([2])	([2])	([2])	([2])	([2])
South Dakota.....	613	76	212	0.8	-	212
Tennessee.....	1,309	325	3,009	2.1	1,049	1,960
Texas.....	1,162	1,165	6,527	1.6	[1] 686	5,841
Utah.....	1,071	724	-	-	-	-
Vermont.....	762	62	308	2.1	-	308
Virgin Islands....	143	-	88	4.4	67	21
Virginia.....	7,058	([2])	([2])	([2])	-	([2])
Washington.....	3,726	1,152	805	0.8	-	805
West Virginia.....	2,626	42	622	0.9	98	524
Wisconsin.....	5,590	935	865	0.5	323	542
Wyoming.....	203	-	136	1.0	69	67

[1] Report incomplete. [2] Not reported.

Medical Assistance for the Aged State Legislation in 1965

In 1960 Congress established a new program of Medical Assistance for the Aged with Federal sharing in the costs of medical care and services for aged persons able to provide for their own maintenance needs but unable to pay for necessary medical care. Since that time, the growth of MAA programs in the States has shown a steady pattern of advancement. Continuing State interest in providing better health care for the needy was again reflected in the substantial volume of MAA legislation enacted in 1965. Most of the new laws, amendatory in nature, granted additional statutory authority for extensions and improvements in existing programs, while others were in the form of basic legal authorizations for the initial establishment of a State program. Since many changes are occurring in State programs as a result of the enactment of title XIX of the Social Security Act late in 1965, the actions of the 1965 legislatures have especial significance.

Basic Authorization

Basic statutory authorization for an MAA program in Arizona, Montana, and Nevada was provided for the first time by the 1965 legislatures of those States.

Extension of Kinds and Amounts of Service

Connecticut's MAA law was amended by the deletion of a specific listing of authorized types of care and services, and the substitution of authority for the provision of such medical, dental and hospital care, supplies and treatment as are provided in the State's other public assistance programs. Previously there had been no authority for dental care in MAA.

Under an Indiana amendment, chiropractic services were included within the scope of authorized MAA medical services. Another amendment provided that the attending dentist, optometrist and chiropractor shall certify as to the need for his own services; before amendment, the law required that the need for medical services be certified to by the "attending physician."

In Michigan a statutory specification of the medical care to be provided under MAA was expanded to include dental assistance and hospitalization incident to the need for dental care, with certification of such need to be made by the attending dentist. The same Act contains authority for providing and paying for such dental care through a contract with an appropriate private agency.

Michigan's MAA program had been limited by statute to the provision of nursing home service in a State licensed nursing home that followed hospitalization for acute illness and to a maximum of 90 days in any 12-month period. By a 1965 amendment which removed both of these limitations, such nursing home care is now authorized to the extent found necessary by the attending physician or dentist. Prior to the amendment, only the attending physician could authorize such services.

Nebraska's enabling law, enacted in 1963, authorized the payment of costs of hospital care for a recipient above the first $65 in any 6-month period, and costs of other itemized medical services above the first $35 for each in any 6-month period. A 1965 amendment substantially liberalized these provisions by reducing to $35 the amount of hospital care for which the recipient is responsible, and by increasing the period of the "deductibles" for all types of services to 12 months. Under another provision of the same statute, the total personal and med-

ical needs of a person receiving care in a licensed home for the aged, or receiving chronic hospital or convalescent hospital care, are to be provided under MAA with a stipulation that allowance for personal needs[1] are to be paid direct to the recipient.

In Pennsylvania, the definition of "post hospital care" in MAA was amended so as to include nursing care in the private home of the patient when ordered by a physician and furnished by a public health organization or by an individual registered nurse, with payments therefor limited to $4 per visit plus travel allowance.

Texas' MAA law was amended to include authority for vendor payments for optometric care when the need has been certified to by the optometrist. By specific limitation, the services of optometrists who are not also regularly licensed physicians are restricted to ascertaining and measuring the powers of vision and to the fitting of lenses or prisms.

By virtue of a 1965 amendment to the Wyoming law, the share of the costs of medical services for which an individual is responsible before MAA payments will be made was lowered from $100 to $25 annually.

Property and Income Limitations

Four States (Connecticut, Nebraska, South Dakota, and Tennessee) increased their statutory dollar maximums on the amount of annual income allowable for eligibility purposes. The Nebraska statute contained an added provision that these income exemptions do not apply in the case of persons under care in homes for the aged or infirm, or in chronic or convalescent hospitals, where care is to be paid for on a "need" basis.

In amending its MAA law, Minnesota retained the same dollar limits on permissible annual income, but changed the basis of application from "gross" to "anticipated" annual income. It also added a provision which requires that where property is unoccupied by the person or his spouse and is not producing a reasonable return, an amount determined as a reasonable annual return on the person's equity in the property shall be included in determining his anticipated annual income.

Certain provisions were deleted from Illinois' law which specified the maximum dollar amounts of income and other resources of an individual and his spouse which were allowable in determining eligibility for MAA. In substitution, the new law made provision for standards, established by the State Department in consultation with the Legislative Advisory Committee, to be used in determining what portion of a person's income and resources is available to meet medical costs deriving from illness or disability. The law specified that the standards shall take into account the requirements of the spouse or other of the applicant's dependents. Another of Illinois' 1965 laws authorizes the State Department of Welfare to exclude the loan value of personal life insurance from consideration as available to meet medical costs.

A New York amendment regarding eligibility for MAA deleted statutory language restricting allowable annual income to maximum dollar amounts and specifying the dollar amount of annual payments on personal health insurance which could be excluded. In substitution, the amendment provides that such amounts shall be within the limits prescribed by the State Department of Welfare.

Recovery of Assistance

Four State legislatures enacted amendatory laws relating to the recovery from the estate of a deceased recipient of costs of the medical care furnished him under their MAA programs.

Of these, Michigan and Wisconsin entirely eliminated their statutory requirements for recovery of health assistance payments through the filing of a lien or claim against the estate of a deceased recipient.

[1] *Not Federally matchable.*

Illinois enacted a new provision in its MAA law permitting the State Department, by rule, to defer or waive enforcement of such claims in cases where the deceased is survived by a dependent spouse and minor child and also in cases where rehabilitative training of the surviving spouse or children would help them to attain a self-support status and reduce the likelihood of their return to dependency on public assistance.

North Dakota's MAA law was amended to provide that a recipient may not be required to transfer his property in trust as security for assistance.

Concurrent Receipt of OAA and MAA

Since enactment of the MAA provisions of the Social Security Act of 1960, Federal financial sharing has been prohibited in the cost of medical care furnished under a State MAA program to an individual who was also a recipient of OAA. By virtue of one of the 1965 amendments to the Social Security Act, such Federal sharing is now permitted for services furnished during the month an OAA recipient enters or leaves a medical facility.

California's statutory restriction against eligibility of an OAA recipient for MAA was modified by an amendment making the provision inoperative to the extent Federal law permits concurrent receipt of both OAA and MAA benefits.

Nebraska's legislature entirely eliminated a statutory provision which was even more restrictive than the Federal law in that it precluded from eligibility for MAA not only recipients of OAA but also recipients of AB, APTD, and AFDC.

A 1965 amendment to Oregon's MAA law now authorizes MAA for a recipient of OAA for the month in which he is admitted to or discharged from a medical institution, including a nursing home.

Taking action similar to that of California, Pennsylvania's legislature modified its statutory prohibition against eligibility of an OAA recipient for MAA benefits by a new provision making the prohibition applicable only to situations where Federal financial participation would be unavailable in MAA granted to an OAA recipient.

An amendment to Michigan's OAA law declares that a person receiving care in a convalescent home who is eligible to receive MAA shall not be eligible for OAA.

Medical Assistance to the Tubercular and Mentally Ill

Under the 1965 Amendments to the Social Security Act, Federal financial participation is now available to States with respect to individuals 65 years of age and older who are patients in institutions for tuberculosis or mental disease and to those in medical institutions with a diagnosis of tuberculosis or psychosis.

A Michigan statute effective January 8, 1966, authorized MAA for persons receiving inpatient or outpatient medical treatment because of a diagnosis of tuberculosis or mental disease, as well as for patients in an institution for tuberculosis or mental disease.

Such authority was also given by the Minnesota legislature which, in addition, further liberalized its law by the repeal of a previous provision which excluded from the definition of a "medical institution" any licensed medical or congregate care facility whose sole purpose is the care of persons diagnosed as having tuberculosis or a psychosis.

A 1965 law, by deleting certain statutory language in Pennsylvania's MAA law, authorized inpatient hospital care for patients in institutions for tuberculosis or mental disease. As to patients in a medical institution as a result of a diagnosis of psychosis, the same law authorized both inpatient hospital care in a medical institution and public nursing home care.

MARGARET K. ADAMS
Division of Welfare Services
Bureau of Family Services

Program and Operating Statistics

Public Assistance in June 1966

In June, most of the public assistance programs showed a decrease in the number of persons assisted. The decreases of 26,400 recipients, or 0.6 percent, in aid to families with dependent children and of 17,600 recipients, or 2.9 percent, in general assistance reflected, in part, continued seasonal improvement in economic conditions. In aid to families with dependent children, the decrease centered in the unemployed-parent segment, under which 31,900 fewer persons were aided in June than in May. Exclusive of the unemployed-parent segment, the number of recipients of aid to families with dependent children increased slightly. The number of recipients dropped 2,000 or 0.1 percent in old-age assistance and 200 or 0.2 percent in aid to the blind.

In aid to the permanently and totally disabled, the number assisted was up 3,800 or 0.6 percent. Payments under medical assistance for the aged were made in behalf of 3,600 or 1.9 percent more persons in June than in May.

No change occurred from May to June in the number of States administering medical assistance programs under title XIX. In both months, there were nine such State programs in operation, including New York's, for which the State's plan had not yet been approved.

Total payments for assistance under all programs combined were $532.8 million in June--$15.1 million above the May figure. Medical assistance payments under title XIX increased $15.8 million. California accounted for two-thirds of the total increase in payments under title XIX programs, although all States with such programs reported increases from May levels. The only program other than medical assistance under title XIX with an increase in total payments in June was aid to the permanently and totally disabled, in which an increase of $0.6 million occurred. In June, for all programs combined, vendor payments for medical care represented slightly more than a third of total assistance payments--the highest proportion in the history of public assistance.

Money payments to recipients decreased $212,000 in aid to families with dependent children, but rose under each of the other programs providing such payments.

Reported activity in individual States was largely related to nursing home care or other types of medical services. Virginia applied a new maximum of $225 in making payments to certain approved nursing homes in behalf of recipients of old-age assistance, aid to the blind, and aid to the permanently and totally disabled. In Iowa, average vendor medical payments increased substantially in aid to the blind and aid to the permanently and totally disabled as a result of a recent change providing for meeting the costs of nursing home care by means of payments to vendors instead of including the costs of such care in money payments to recipients. Iowa's program of medical assistance for the aged experienced a marked increase in recipients in June, reflecting the effect of liberalizations in program benefits which had become effective in April. In South Dakota, prepaid premiums to Blue Cross-Blue Shield organizations for hospitalization and physicians' services for recipients of medical assistance for the aged had resulted in a substantial accumulated balance of funds, and in June the State discontinued making these premium payments. Upon depletion of the balance in the fund, the State will pay the Blue Cross-Blue Shield organizations for the actual amounts expended on behalf of recipients.

TABLE 1. Number of recipients of public assistance in the United States, by month, June 1965-June 1966[1]

[Except for general assistance, includes cases receiving only vendor payments for medical care]

Year and month	Old-age assistance 2/	Medical assistance for the aged 2/	Aid to the blind 2/	Aid to the permanently and totally disabled 2/	Aid to families with dependent children			Medical assistance 4/	General assistance 5/	
					Families	Total recipients 3/	Children		Cases	Recipients
	Number of recipients									
1965										
June	2,149,220	267,996	95,350	555,594	1,062,802	4,429,038	3,325,987	---	318,000	664,000
July	2,144,949	265,664	95,170	559,285	1,052,525	4,377,100	3,291,501	---	306,000	644,000
August	2,144,534	266,508	95,135	563,111	1,053,894	4,388,155	3,296,511	---	314,000	665,000
September	2,140,172	275,761	6/ 86,082	565,588	1,053,409	4,378,513	3,295,589	---	305,000	649,000
October	2,126,058	274,499	6/ 85,964	567,148	1,052,100	4,369,875	3,293,039	---	299,000	632,000
November	2,129,103	280,417	6/ 86,129	571,147	1,056,521	4,393,067	3,311,929	---	300,000	641,000
December	2,127,179	279,835	6/ 86,079	575,245	1,069,316	4,456,995	3,358,112	---	310,000	677,000
1966										
January	2,110,367	250,657	6/ 85,578	574,013	1,077,595	4,497,285	3,386,940	7/ 330,339	319,000	715,000
February	2,105,346	255,423	6/ 85,524	578,377	1,091,607	4,562,156	3,435,063	7/ 321,159	319,000	714,000
March	2,107,226	219,752	6/ 85,305	579,874	1,094,203	4,575,521	3,445,893	7/ 388,637	321,000	712,000
April	2,104,327	217,797	6/ 85,129	583,901	1,102,449	4,595,265	3,465,554	7/ 369,274	302,000	649,000
May	2,109,303	190,127	6/ 85,163	584,261	1,094,146	4,546,916	3,435,089	7/ 597,996	290,000	609,000
June	2.107,345	193,728	6/ 85,007	588,041	1,090,721	4,520,553	3,417,673	7/ 642,923	286,000	592,000
	Percentage change from previous month									
1965										
June	-0.1	+3.5	-0.2	+1.0	-0.6	-0.9	-0.8	---	-2.4	-3.6
July	-.2	-.9	-.2	+.7	-1.0	-1.2	-1.0	---	-3.5	-3.0
August	(8/)	+.3	(8/)	+.7	+.1	+.3	+.2	---	+2.6	+3.2
September	-.2	+3.5	(9/)	+.4	(8/)	-.2	(8/)	---	-2.9	-2.3
October	-.7	-.5	-.1	+.3	-.1	-.2	-.1	---	-2.1	-2.7
November	+.1	+2.2	+.2	+.7	+.4	+.5	+.6	---	+.5	+1.4
December	-.1	-.2	-.1	+.7	+1.2	+1.5	+1.4	---	+3.4	+5.6
1966										
January	-.8	-10.4	-.6	-.2	+.8	+.9	+.9	---	+2.7	+5.6
February	-.2	+1.9	-.1	+.8	+1.3	+1.4	+1.4	-2.8	-.1	-.1
March	+.1	-14.0	-.3	+.3	+.2	+.3	+.3	+21.0	+.8	-.3
April	-.1	-.9	-.2	+.7	+.8	+.4	+.6	-5.0	-5.9	-8.9
May	+.2	-12.7	(10/)	+.1	-.8	-1.1	-.9	+61.9	-3.9	-6.1
June	-.1	+1.9	-.2	+.6	-.3	-.6	-.5	+7.5	-1.6	-2.9

1/ All data subject to revision. 2/ Represents data for recipients of the specified types of assistance under separate State programs and under State programs for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 3/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of such adults were considered in determining the amount of assistance. 4/ Program initiated January 1966 under Public Law 89-97. 5/ Partly estimated. Excludes Idaho, Indiana, and Nebraska; data not available. 6/ Excludes State blind pension program in Pennsylvania administered under State law without Federal participation. 7/ Does not include data for Puerto Rico for January-June and California for March-June. 8/ Decrease of less than 0.05 percent. 9/ Not computed; base not comparable. 10/ Increase of less than 0.05 percent.

not include data for Puerto Rico for January-June and California for March-June. 8/ Decrease of less than 0.05 percent. 9/ Not computed; base not comparable. 10/ Increase of less than 0.05 percent.

TABLE 2. Amount of public assistance payments in the United States, by month, June 1965-June 1966[1]

(Except for general assistance, includes vendor payments for medical care)

Year and month	Total 2/	Old-age assistance 3/	Medical assistance for the aged 3/	Aid to the blind 3/	Aid to the permanently and totally disabled 3/	Aid to families with dependent children	Medical assistance 4/	General assistance 5/
	Amount of assistance							
1965								
June	$459,850,000	$172,862,075	$50,852,533	$8,392,761	$47,063,386	$149,814,741	---	$20,789,000
July	454,362,000	171,329,045	49,331,830	8,277,185	46,601,839	148,815,802	---	20,191,000
August	459,091,000	171,753,587	50,472,206	8,280,131	48,140,875	150,496,685	---	20,216,000
September	462,861,000	170,426,870	52,105,597	6/ 7,753,829	47,894,463	154,976,542	---	20,670,000
October	457,017,000	168,348,580	50,217,185	6/ 7,783,847	49,013,402	152,707,158	---	20,009,000
November	465,613,000	171,396,465	52,358,319	6/ 7,792,306	49,514,472	154,211,471	---	20,369,000
December	470,535,000	169,902,685	53,116,501	6/ 8,018,238	50,201,439	158,366,820	---	21,407,000
1966								
January	474,511,000	165,473,714	45,166,935	6/ 7,878,108	48,402,468	157,335,806	7/ $20,450,201	21,702,000
February	480,503,000	165,684,904	47,805,554	6/ 7,740,584	48,964,447	160,120,859	7/ 19,634,762	22,066,000
March	501,709,000	163,401,635	41,614,070	6/ 7,755,450	48,534,001	162,215,720	7/ 44,549,211	22,711,000
April	498,294,000	163,397,411	37,677,349	6/ 7,630,251	48,935,439	161,474,677	7/ 46,717,587	21,442,000
May	517,739,000	163,805,473	28,343,883	6/ 7,657,700	47,283,219	157,643,736	7/ 81,353,433	20,696,000
June	532,835,000	163,250,190	28,272,190	6/ 7,643,312	47,837,732	157,592,525	7/ 97,188,695	20,764,000
	Percentage change from previous month							
1965								
June	+0.4	+0.8	+2.9	+1.6	+2.5	-1.5	---	-2.5
July	-1.2	-.9	-3.0	-1.4	-1.0	-.7	---	-2.9
August	+1.0	+.2	+2.3	(8/)	+3.3	+1.1	---	+.1
September	+.8	-.8	+3.2	(9/)	-.5	+3.0	---	+2.2
October	-1.3	-1.2	-3.6	+.4	+2.3	-1.5	---	-3.2
November	+1.9	+1.8	+4.3	+.1	+1.0	+1.0	---	+1.8
December	+1.1	-.9	+1.4	+2.9	+1.4	+2.7	---	+5.1
1966								
January	+.8	-2.6	-15.0	-1.7	-3.6	-.7	---	+1.4
February	+1.3	+.1	+5.8	-1.7	+1.2	+1.8	-4.0	+1.7
March	+4.4	-1.4	-13.0	+.2	-.9	+1.3	+126.9	+2.9
April	-.7	(10/)	-9.5	-1.6	+.8	-.5	+4.9	-5.6
May	+3.9	+.2	-24.8	+.4	-3.4	-2.4	+74.1	-3.5
June	+2.9	-.3	-.3	-.2	+1.2	(8/)	+19.5	+.3

1/ All data subject to revision. 2/ Total exceeds sum of columns because of inclusion of vendor payments for medical care from general assistance funds and from special medical funds; data for such expenditures partly estimated for some States. 3/ Represents data for payments to recipients of the specified type of assistance under separate State programs and under State programs for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 4/ Program initiated January 1966 under Public Law 89-97. 5/ Partly estimated. Excludes Idaho, Indiana, and Nebraska; data not available. 6/ Excludes State blind pension program in Pennsylvania administered under State law without Federal participation. 7/ Data not reported by Puerto Rico. 8/ Increase of less than 0.05 percent. 9/ Not computed; base not comparable. 10/ Decrease of less than 0.05 percent.

TABLE 3. Old-age assistance: Recipients and payments to recipients, by State, June 1966[1]

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from--			
		Total amount	Average	May 1966 in--		June 1965 in--	
				Number	Amount	Number	Amount
Total 2/....	2,107,345	$163,250,190	$77.47	-0.1	-0.3	-1.9	-5.6
Ala.....	112,076	7,966,407	71.08	(3/)	+.2	-.1	+5.8
Alaska 4/.....	1,375	5/ 124,063	90.23	-.4	-1.3	+.2	-8.1
Ariz.....	13,342	833,196	62.45	+.5	+.5	+.2	-1.5
Ark. 4/.....	60,850	4,070,596	66.90	+.5	+.9	+1.8	+6.7
Calif.....	280,435	27,163,364	96.86	+.4	-.2	+1.9	-9.8
Colo. 2/.....	41,948	4,083,967	97.36	-.2	-5.7	-4.5	-4.5
Conn.....	5,549	500,424	90.18	-3.3	-1.2	-17.1	-25.3
Del.....	1,539	107,199	69.65	-1.5	-.8	+8.9	+5.1
D. C.....	2,280	223,896	98.20	+.1	+11.0	-3.3	+3.9
Fla. 4/.....	77,364	5,009,825	64.76	+.3	-3.2	+4.3	+3.9
Ga. 4/.....	93,275	5,656,626	60.64	(3/)	(6/)	+1.2	+4.9
Guam.....	179	6,341	35.42	-1.6	-2.2	+2.9	-51.3
Hawaii 4/.....	1,415	104,274	73.69	+2.1	+1.9	+18.3	+21.5
Idaho.....	3,757	311,073	82.80	-.5	+10.4	-10.2	+1.1
Ill. 4/.....	42,707	2,309,674	54.08	-2.6	-6.7	-21.8	-55.5
Ind.....	21,157	2,064,351	97.57	-.4	-.4	-6.2	+5.2
Iowa.....	26,172	2,536,726	96.93	-.5	-1.0	-2.3	-.5
Kans. 4/.....	19,707	1,891,767	95.99	-.4	+.4	-7.9	-9.2
Ky. 4/.....	59,243	3,782,409	63.85	(3/)	-.3	-.3	-.6
La.....	129,960	11,119,612	85.56	-.4	-2.9	-.9	-.1
Maine 4/.....	10,784	897,819	83.25	+.3	-12.5	-.7	-1.0
Md. 4/.....	10,441	982,086	94.06	+.6	+.4	+4.0	+32.2
Mass.....	49,789	5,033,826	101.10	-.4	-.6	-3.9	+4.5
Mich.....	40,398	3,389,154	83.89	-1.2	-7.2	-17.0	-33.3
Minn.....	32,283	1,715,153	53.13	-.6	-.2	+2.0	-39.6
Miss.....	73,852	3,346,129	45.31	+.1	+4.6	+.6	+10.7
Mo.....	98,529	7,538,624	76.51	-.3	+.3	-2.9	+6.4
Mont.....	4,242	340,456	80.26	-.7	-3.3	-18.0	-9.0
Nebr. 4/.....	10,547	1,004,010	95.19	+.4	+3.9	-15.1	-17.2
Nev. 7/.....	2,314	190,313	82.24	---	---	---	---
N. H.....	4,242	467,122	110.12	-12.7	-1.0	-3.0	+4.9
N. J.....	13,964	1,250,525	89.55	-.1	-.2	+.2	+1.0
N. Mex. 4/.....	9,672	810,200	83.77	-.4	-2.7	-5.2	+18.7
N. Y. 4/.....	62,229	4,471,265	71.85	+2.7	+2.8	+9.1	-16.6
N. C.....	41,583	2,846,170	68.45	-.2	(6/)	-2.9	+5.6
N. Dak. 4/.....	4,944	317,595	64.24	-.7	-.8	-2.7	-35.6
Ohio.....	79,383	7,532,280	94.89	-.2	+1.3	-2.4	-2.6
Okla. 4/.....	80,754	6,175,464	76.47	-.3	+.9	-1.9	-22.1
Oreg.....	9,516	701,068	73.67	+.7	-1.6	-5.9	-2.1
Pa.....	43,000	2,995,780	69.67	-.2	-.1	-6.4	-17.0
P. R. 4/.....	27,202	236,328	8.69	-.7	(3/)	-9.0	-17.5
R. I. 4/.....	5,383	536,702	99.70	-.1	-10.8	-6.6	-3.3
S. C. 7/.....	23,875	1,382,295	57.90	---	---	---	---
S. Dak.....	6,257	485,653	77.62	+.1	+.8	-10.0	-30.4
Tenn.....	44,114	2,700,179	61.21	-.3	+2.9	-1.3	+2.1
Tex.....	227,943	17,444,773	76.53	-.1	+2.0	-1.3	+7.7
Utah.....	4,338	312,533	72.05	-.7	+1.1	-8.3	-5.7
Vt. 4/.....	5,228	530,981	101.56	+1.4	+3.5	-2.4	+1.7
V. I.....	424	17,248	40.68	-1.4	-.6	-5.8	-.2
Va.....	12,723	933,778	73.39	-.3	+3.1	-3.1	+5.7
Wash.....	29,784	2,338,144	78.50	+.6	-2.0	-8.2	-14.6
W. Va.....	13,095	779,139	59.50	-1.5	+3.4	-6.6	+2.4
Wis.....	27,859	3,467,580	124.47	-.3	-1.4	-.7	+10.8
Wyo.....	2,324	214,028	92.09	-.6	+1.5	-3.7	+5.0

1/ All data subject to revision. 2/ Includes 3,737 recipients aged 60-64 in Colorado and payments of $326,713 to these recipients. Such payments were made without Federal participation. 3/ Decrease of less than 0.05 percent. 4/ Represents aid to the aged, under program for aid to the aged, blind, or disabled, or for such aid and medical assistance for the aged. 5/ In addition, supplemental payments from general assistance funds were made to recipients. 6/ Increase of less than 0.05 percent. 7/ Data for May; June data not received.

TABLE 4. Medical assistance for the aged: Recipients and payments for recipients, by State, June 1966[1]

State	Number of recipients 2/	Payments for recipients		Percentage change from--			
		Total amount	Average	May 1966 in--		June 1965 in--	
				Number	Amount	Number	Amount
Total	193,728	$28,272,190	$145.94	+1.9	-0.3	-27.7	-44.4
Ala.	277	90,049	325.09	+16.9	+19.0	+7.8	+10.8
Ark. 3/	3,155	209,061	66.26	-4.3	-4.6	+1.8	+10.0
Colo.	5,999	4/ 1,223,632	203.97	+.2	-5.2	+5.8	+25.9
Conn.	8,426	4/ 1,763,138	209.25	-.6	+12.4	+13.5	+22.0
Del.	231	34,030	147.32	+19.7	+5.1	+77.7	+36.6
Dist. of Col.	870	301,028	346.01	+13.9	-25.0	+5.8	-22.5
Fla. 3/	838	278,452	332.28	+21.1	+13.3	+1.1	(5/)
Guam	(6/)	(6/)	---	---	---	---	---
Idaho	2,897	444,028	153.27	+4.8	+12.3	+17.1	+29.4
Ind.	1,469	271,753	184.99	+11.6	+6.1	+259.2	+264.6
Iowa	4,707	409,193	86.93	+270.6	+51.0	-8.9	-28.1
Kans. 3/	3,723	4/ 612,363	164.48	+.7	+3.5	+26.9	+31.7
Ky. 3/	13,138	500,253	38.08	-4.3	+16.5	+4.7	+41.5
La.	579	111,795	193.08	+.7	+5.3	-6.5	+13.5
Maine 3/	674	199,309	295.71	+66.8	+86.7	+12.9	+27.6
Md. 3/	14,381	641,070	44.58	+12.0	+22.0	+14.3	+8.7
Mass.	32,463	4/ 6,551,306	201.81	-1.9	+4.6	+6.6	+18.9
Mich.	13,274	4,765,371	359.00	-11.4	-24.0	+105.7	+72.4
Mont.	1,886	260,910	138.34	-4.8	-7.5	(7/)	(7/)
Nebr. 3/	2,951	4/ 608,055	206.05	-1.4	+.8	+791.5	+432.6
Nev. 8/	456	4/ 186,030	407.96	---	---	----	---
N. H.	2,476	201,713	81.47	-18.0	+9.0	+9.6	+71.8
N. J.	6,381	4/ 1,783,250	279.46	+3.3	+11.4	+18.1	+45.1
N. Mex. 3/	200	32,846	164.23	(9/)	(9/)	(7/)	(7/)
N. C.	4,992	666,664	133.55	+80.0	+205.7	+136.6	+69.1
Oreg.	4,226	608,717	144.04	- 5.7	-8.1	+2.5	-.3
R. I. 3/	10,298	753,583	73.18	-6.6	-22.8	+18.0	+51.9
S. C. 8/	1,350	247,990	183.70	---	---	---	---
S. Dak.	600	83,195	138.66	-61.4	-35.6	-4.2	+182.6
Tenn.	11,964	482,737	40.35	-7.6	-13.8	+12.9	+39.9
Utah	2,463	289,967	117.73	+.2	+.2	-1.1	+18.8
Vt. 3/	183	42,906	234.46	-2.1	+41.6	+45.2	+55.1
V. I.	144	6,342	44.04q	(10/)	(10/)	+1.4	-7.9
Va.	5,591	519,275	92.88	+24.5	+75.6	+57.5	+106.8
Wash.	10,571	1,587,932	150.22	+.1	+2.5	+1.7	+4.4
W. Va.	12,191	368,321	30.21	-.4	-10.6	+10.1	+26.5
Wis.	7,672	1,095,861	142.84	+9.8	+8.9	+10.1	+18.4
Wyo.	32	40,065	(9/)	(9/)	(9/)	(9/)	(9/)

1/ All data subject to revision. 2/ Persons for whom vendor payments were made during the report month. 3/ Represents medical assistance for the aged under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 4/ Includes money payments not subject to Federal participation as follows: $28,009 in Colorado, $107 in Connecticut, $16,828 in Kansas, $90,886 in Massachusetts, $13,751 in Nebraska, $2,030 in Nevada, and $7,632 in New Jersey. 5/ Decrease of less than 0.05 percent. 6/ Program in operation but no payments made in June 1966. 7/ No program in operation in June 1965. 8/ Represents data for May; June data not received. 9/ Average payment not computed on base of fewer than 50 recipients; percentage change on fewer than 100 recipients. 10/ No payments made in May 1966.

TABLE 5. Aid to the blind: Recipients and payments to recipients, by State, June 1966[1]

/Includes vendor payments for medical care and cases receiving only such payments/

State	Number of recipients	Payments to recipients		Percentage change from--			
		Total amount	Average	May 1966 in--		June 1965 in--	
				Number	Amount	Number	Amount
Total 2/ 3/..	85,007	$7,643,312	$89.91	-0.2	-0.2	-10.8	-8.9
Ala.....	1,861	128,274	68.93	0	(4/)	+.9	+1.1
Alaska 5/.....	106	9,090	85.75	-3.6	+.3	-4.5	-2.4
Ariz.....	777	55,882	71.92	-1.4	-1.3	-5.0	-4.7
Ark. 5/.....	1,902	140,891	74.08	-.1	-1.8	-2.1	+2.7
Calif. 2/.....	12,401	1,595,306	128.64	(4/)	+1.1	(6/)	-11.4
Colo.....	226	21,098	93.35	-3.0	+1.1	-9.2	-3.1
Conn.....	295	31,494	106.76	-3.9	-18.7	-4.5	-24.5
Del.....	340	30,494	89.69	-.9	+9.9	+8.3	+17.6
D. C.....	198	15,203	76.78	+2.6	-.8	-2.9	-5.0
Fla. 5/.....	2,597	178,730	68.82	-.5	-2.6	+.2	+2.2
Ga. 5/.....	3,190	198,362	62.18	-.4	-2.2	(6/)	+2.5
Guam.....	6	180	(7/)	---	---	---	---
Hawaii 5/.....	65	5,657	87.03	(7/)	(7/)	(7/)	(7/)
Idaho.....	114	7,870	69.04	0	-1.5	-13.6	-17.1
Ill. 5/.....	2,085	144,130	69.13	-1.4	-3.7	-12.8	-37.6
Ind.....	1,691	168,711	99.77	-.1	+5.1	-3.8	+8.2
Iowa.....	1,059	114,567	108.18	-.5	+7.4	-6.4	-1.3
Kans. 5/.....	465	47,228	101.57	+.2	-4.8	-7.6	-7.1
Ky. 5/.....	2,517	188,870	75.04	+.2	+.3	+.5	+1.1
La.....	2,621	211,276	80.61	-.2	+.4	-4.9	-5.7
Maine 5/.....	236	21,012	89.03	-3.3	-3.0	-21.6	-19.3
Md. 5/.....	362	32,313	89.26	-1.1	+.2	-7.7	+1.8
Mass.....	2,275	332,941	146.35	-.7	-14.9	+1.7	+8.5
Mich.....	1,552	136,475	87.93	-1.8	-9.4	-6.9	-13.2
Minn.....	943	66,529	70.55	-1.5	+1.7	-10.7	-43.9
Miss.....	2,464	120,336	48.84	-.2	+1.3	-4.5	+1.6
Mo. 2/.....	4,188	335,040	80.00	-.2	-.2	-3.7	+2.7
Mont.....	209	15,307	73.24	+.5	-.4	-13.3	-27.8
Nebr. 5/.....	503	54,559	108.47	-1.4	-3.3	-19.1	-17.1
Nev. 8/.....	160	16,829	105.18	---	---	---	---
N. H.....	244	28,288	115.93	-.4	+.2	-6.2	+.5
N. J.....	903	84,466	93.54	-.4	-.9	-2.1	+3.3
N. Mex. 5/.....	352	34,997	99.42	+.6	-1.7	+.9	+21.0
N. Y. 5/.....	3,027	279,393	92.30	+.5	+3.7	-5.0	-24.8
N. C.....	4,809	363,210	75.53	+.1	+.5	-2.4	+5.0
N. Dak. 5/.....	81	5,915	73.02	(7/)	(7/)	(7/)	(7/)
Ohio.....	3,079	293,046	95.18	0	+7.1	-5.6	+8.3
Okla. 5/.....	1,586	165,401	104.29	-.4	+.2	-2.0	-16.4
Oreg.....	504	49,191	97.60	+1.0	+2.2	+7.5	+17.1
Pa. 3/.....	9,718	1,039,651	106.98	+1.3	+1.9	-44.6	-21.8
P. R. 5/.....	1,281	11,153	8.71	-1.0	-.6	-6.8	-7.0
R. I. 5/.....	108	11,510	106.57	-.9	-7.2	+1.9	+15.4
S. C. 8/.....	1,888	117,930	62.46	---	---	---	---
S. Dak.....	109	8,001	73.40	0	-1.1	-2.7	+4.4
Tenn.....	1,929	116,698	60.50	-1.7	-1.9	-6.4	+1.4
Tex.....	4,343	310,916	71.59	-.5	(4/)	-7.0	-4.4
Utah.....	164	13,277	80.96	-1.2	+10.6	-1.8	+5.4
Vt. 5/.....	114	8,521	74.75	-6.6	-12.0	-5.0	-9.9
V. I.....	10	393	(7/)	(7/)	(7/)	(7/)	(7/)
Va.....	1,140	88,101	77.28	-.3	+6.4	0	+6.6
Wash.....	664	58,295	87.79	-1.3	+6.8	-.9	-6.5
W. Va.....	747	44,822	60.00	-1.6	+.2	-4.2	-.3
Wis.....	748	81,198	108.55	-.3	-7.1	-5.7	-4.7
Wyo.....	51	4,285	84.02	(7/)	(7/)	(7/)	(7/)

1/ All data subject to revision. 2/ Data include recipients of payments made without Federal participation and payments to these recipients as follows: California, $11,000 to 70 recipients and Missouri, $60,005 to 735 recipients. 3/ Does not include $631,111 to an estimated 7,800 recipients under State blind pension program in Pennsylvania administered under State law without Federal participation. 4/ Decrease of less than 0.05 percent. 5/ Represents aid to the blind under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 6/ Increase of less than 0.05 percent. 7/ Average payment not computed on base of fewer than 50 recipients; percentage change on fewer than 100 recipients. 8/ Data for May; June data not received.

TABLE 6. Aid to the permanently and totally disabled: Recipients and payments to recipients, by State, June 1966[1]

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from--			
		Total amount	Average	May 1966 in--		June 1965 in--	
				Number	Amount	Number	Amount
Total.....	588,041	$47,837,732	$81.35	+0.6	+1.2	+5.8	+1.6
Ala.....	14,920	751,187	50.35	+.3	+.8	-.2	+8.4
Alaska 2/.....	282	30,735	108.99	+6.0	-11.0	+30.0	-15.2
Ariz.....	4,424	295,076	66.70	+2.0	+1.7	+17.9	+16.8
Ark. 2/.....	9,880	821,863	83.18	+.3	-.4	+2.7	+38.1
Calif.....	86,937	9,387,649	107.98	+1.3	+1.8	+18.9	+9.1
Colo.....	6,624	537,746	81.18	+.4	+.8	+7.8	+10.0
Conn.....	9,269	724,323	78.14	+.2	-10.4	+9.4	-5.6
Del.....	536	45,477	84.85	-.4	+2.3	+20.7	+33.8
D. C.....	3,564	307,860	86.38	+.8	+2.5	+7.3	+11.5
Fla. 2/.....	19,473	1,334,807	68.55	+.6	-3.9	+9.7	+10.2
Ga. 2/.....	27,986	1,769,663	63.23	-.1	+.3	+3.5	+6.4
Guam.....	46	1,537	(3/)	(3/)	(3/)	(3/)	(3/)
Hawaii 2/.....	1,129	102,662	90.93	+2.4	+2.4	-7.2	-28.1
Idaho.....	3,191	186,063	58.31	-.6	-.3	+3.5	+5.1
Ill. 2/.....	28,940	2,128,640	73.55	-.5	-1.9	-3.1	-29.8
Ind.....	1,971	273,361	138.69	+2.8	-8.1	+22.4	+25.2
Iowa.....	1,556	172,156	110.64	+2.6	+47.8	+21.2	+60.8
Kans. 2/.....	5,379	657,564	122.25	+.4	+.5	+5.4	+12.4
Ky. 2/.....	12,548	1,007,694	80.31	+.5	+1.7	+9.4	+12.5
La.....	20,923	1,270,700	60.73	+.7	+1.1	+6.4	+10.0
Maine 2/.....	2,277	220,033	96.63	-.2	-.2	+.6	+7.6
Md. 2/.....	8,636	829,560	96.06	+.9	+1.2	+8.4	+20.3
Mass.....	14,208	2,413,743	169.89	+.7	+1.3	+7.2	+20.1
Mich.....	15,008	1,563,851	104.20	+.9	-7.4	+25.3	+13.5
Minn.....	5,564	384,011	69.02	+2.8	+2.8	+41.9	+59.7
Miss.....	20,426	929,597	45.51	+.6	+.3	+7.1	+11.0
Mo.....	15,675	1,235,082	78.79	+.6	+1.6	+2.2	+10.7
Mont.....	1,448	100,420	69.35	-3.7	-.3	+5.8	-7.3
Nebr. 2/.....	3,177	363,256	114.34	+2.1	+1.8	+16.6	+36.1
N. H.....	675	80,655	119.49	+.4	-.1	+8.3	+9.3
N. J.....	9,045	958,451	105.96	+.5	+.7	+2.7	+7.3
N. Mex. 2/.....	4,190	406,697	97.06	+.7	-1.4	+7.6	+32.0
N. Y. 2/.....	33,586	2,793,409	83.17	+1.5	+2.4	-7.3	-42.8
N. C.....	24,095	2,116,047	87.82	+3.0	+15.4	+5.4	+20.0
N. Dak. 2/.....	1,587	117,294	73.91	-2.6	+.4	-8.4	-49.2
Ohio.....	20,458	1,893,560	92.56	+.8	+6.7	+3.6	+22.0
Okla. 2/.....	16,298	1,543,904	94.73	+.1	+1.6	+11.0	-6.3
Oreg.....	8,618	617,565	71.66	-.3	(4/)	+5.0	+10.2
Pa.....	20,784	1,487,019	71.55	+.8	+1.4	-.8	-8.5
P. R. 2/.....	19,846	174,320	8.78	-.5	+.2	-3.9	-7.9
R. I. 2/.....	2,968	287,840	96.98	+.4	-11.5	+2.4	+3.3
S. C. 5/.....	9,248	523,487	56.61	---	---	---	---
S. Dak.....	1,197	96,935	80.98	+.7	+2.3	+7.6	+24.2
Tenn.....	14,569	881,455	60.50	+.7	+.2	+7.4	+17.9
Tex.....	10,402	613,701	59.00	+.5	+.6	+4.2	+7.6
Utah.....	4,960	379,000	76.41	+.3	+1.2	-.1	+13.8
Vt. 2/.....	1,276	124,111	97.27	-7.1	+3.0	-.5	+11.5
V. I.....	47	1,879	(3/)	(3/)	(3/)	(3/)	(3/)
Va.....	6,930	537,759	77.60	+.2	+5.4	+.3	+9.6
Wash.....	19,088	1,216,446	63.73	+.9	+.8	+3.8	+.5
W. Va.....	5,767	329,234	57.09	-1.7	-2.0	-.8	+6.3
Wis.....	5,675	749,356	132.05	-2.1	+.3	-11.2	-4.6
Wyo.....	735	61,292	83.39	0	-.9	+4.3	+4.3

1/ All data subject to revision. 2/ Represents aid to the permanently and totally disabled under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 3/ Average payment not computed on base of fewer than 50 recipients; percentage change on fewer than 100 recipients. 4/ Decrease of less than 0.05 percent. 5/ Data for May; June data not received.

TABLE 7. Aid to families with dependent children: Recipients and payments to recipients, by State, June 1966[1]

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of families	Number of recipients		Payments to recipients			Percentage change from--			
					Average per--		May 1966 in--		June 1965 in--	
		Total 2/	Children	Total amount	Family	Recipient	Number of recipients	Amount	Number of recipients	Amount
Total 3/ 4/....	1,090,721	4,520,553	3,417,673	$157,592,525	$144.48	$34.86	-0.6	(5/)	+2.1	+5.2
Ala. 3/.....	17,257	71,254	56,693	904,880	52.44	12.70	-1.0	-1.1	-3.7	+3.6
Alaska 3/.....	1,336	4,907	3,761	172,401	129.04	35.13	-.1	-.8	+.5	+1.2
Ariz. 3/ 4/....	9,707	42,204	32,016	1,196,153	123.23	28.34	-.1	+.1	+3.6	+2.3
Ark.....	7,585	32,082	24,344	570,791	75.25	17.79	-1.1	-.3	+2.2	+7.7
Calif. 3/ 4/...	159,089	647,053	478,122	28,129,180	176.81	43.47	-1.1	-1.9	+14.3	+15.4
Colo.....	12,443	48,324	37,257	1,934,618	155.48	40.03	-.6	-.7	+9.7	+16.1
Conn. 4/.....	13,763	55,133	41,110	2,743,602	199.35	49.76	-1.4	-3.0	-7.4	-4.8
Del. 4/.....	2,800	12,250	9,432	372,382	132.99	30.40	-2.6	-2.4	+5.0	+12.0
D. C.....	4,780	22,618	18,238	754,052	157.75	33.34	+.7	+.3	+6.4	+8.7
Fla.....	31,445	122,978	97,963	1,957,078	62.24	15.91	+1.5	+1.6	+14.0	+15.7
Ga.....	20,927	83,539	64,693	2,029,857	97.00	24.30	-.7	-.7	+11.7	+22.6
Guam.....	143	770	651	12,054	84.29	15.65	-.8	-1.4	+.8	+3.6
Hawaii 4/.....	3,464	15,134	11,307	616,708	178.03	40.75	-.4	+.7	+11.0	+28.3
Idaho.....	2,554	9,931	7,296	392,462	153.67	39.52	-2.0	-1.8	-1.5	+.4
Ill. 3/ 4/.....	53,033	249,839	195,654	10,005,175	188.66	40.05	-1.2	-2.2	-4.6	-15.0
Ind. 3/.....	11,826	49,415	37,364	1,637,389	138.46	33.14	+.2	+1.6	+.8	+12.6
Iowa.....	11,722	46,924	34,297	1,916,781	163.52	40.85	+.3	-1.7	+2.8	+7.9
Kans. 3/ 4/....	8,944	37,582	29,304	1,515,349	169.43	40.32	-.7	-.5	-1.9	+2.1
Ky. 3/.....	21,747	84,743	61,149	2,257,084	103.79	26.63	(6/)	-.8	+1.0	+5.2
La. 3/.....	24,535	108,013	82,730	2,588,921	105.52	23.97	-1.5	-1.9	+2.5	+6.4
Maine.....	5,194	19,494	14,432	615,232	118.45	31.56	-.7	-2.3	+2.6	+12.3
Md. 3/ 4/.....	21,768	90,139	69,980	3,563,517	163.70	39.53	-.1	+.1	+5.4	+23.4
Mass. 4/.....	28,524	108,269	81,477	5,522,573	193.61	51.01	+.5	+2.7	+9.8	+17.4
Mich. 3/ 4/....	38,240	156,953	117,945	5,583,068	146.00	35.57	-.5	-1.9	-4.0	-6.1
Minn. 3/.....	14,531	53,601	41,673	2,503,296	172.27	46.70	+.1	-.9	+.9	-9.9
Miss.....	20,885	85,452	68,799	674,166	32.28	7.89	-.1	+.2	+2.3	-11.6
Mo. 3/.....	26,082	107,819	82,944	2,775,423	106.41	25.74	-.2	+.2	-.6	+5.3
Mont.....	2,087	8,385	6,514	307,405	147.30	36.66	+.4	+1.3	+11.5	+12.1
Nebr. 3/ 4/....	4,746	19,295	14,843	632,435	133.26	32.78	-.4	-.9	+12.6	+16.1
Nev. 7/.....	1,365	5,606	4,417	181,335	132.85	32.35	---	---	---	---
N. H.....	1,234	5,126	3,858	240,697	195.05	46.96	-.4	-1.7	+8.6	+16.6
N. J.....	29,593	118,066	89,736	6,073,049	205.22	51.44	+.4	+.9	+7.6	+10.0
N. Mex. 3/.....	7,593	31,656	24,224	1,037,907	136.69	32.79	+1.3	-4.7	+6.7	+16.5
N. Y. 4/.....	136,481	570,404	421,768	27,651,704	202.60	48.48	+.5	+4.6	+5.6	+7.9
N. C. 3/.....	27,123	112,995	84,810	3,039,289	112.06	26.90	+.9	+4.1	-.5	+5.2
N. Dak.....	2,046	8,200	6,275	331,433	161.99	40.42	-1.1	-1.2	-2.1	-13.3
Ohio 4/.....	45,504	192,130	144,298	6,866,549	150.90	35.74	-1.1	+4.7	-1.8	+12.4
Okla. 3/ 4/....	19,402	77,470	58,045	2,633,937	135.76	34.00	-.3	+3.1	+3.9	+6.4
Oreg. 3/ 4/....	9,002	34,581	25,647	1,404,703	156.04	40.62	-5.1	-5.2	+6.2	+11.2
Pa. 4/.....	57,107	247,521	182,926	7,852,122	137.50	31.72	-2.4	-2.4	-14.4	-13.4
P. R.....	45,599	186,096	148,729	764,894	16.77	4.11	-.7	-1.2	-5.5	-6.0
R. I. 4/.....	6,155	24,121	17,892	1,025,058	166.54	42.50	+.5	-13.6	+2.3	+4.3
S. C. 7/.....	6,824	26,897	21,726	428,852	62.84	15.94	---	---	---	---
S. Dak.....	3,262	12,287	9,284	416,884	127.80	33.93	+1.0	+3.1	+6.7	+12.6
Tenn. 3/.....	20,411	82,803	63,678	2,036,656	99.78	24.60	-1.0	-2.8	+6.4	+16.5
Tex.....	21,728	98,320	74,476	2,098,692	96.59	21.35	+.2	+.2	+4.6	+19.3
Utah 3/ 4/.....	5,965	24,274	17,618	879,360	147.42	36.23	+1.2	+3.0	+4.2	+17.3
Vt.....	1,542	5,918	4,361	172,058	111.58	29.07	-.5	-.8	+4.7	+2.5
V. I.....	317	1,263	1,073	25,422	80.20	20.13	-.2	+.5	+21.6	+21.9
Va. 3/.....	11,118	47,363	36,529	1,244,569	111.94	26.28	-.9	+1.1	+3.0	+7.1
Wash. 3/ 4/....	16,461	64,142	46,685	2,280,811	138.56	35.56	-.9	-5.4	-13.6	-12.6
W. Va. 3/ 4/...	21,601	101,473	71,438	2,786,877	129.02	27.46	-3.6	-4.0	-9.9	-7.4
Wis. 3/.....	11,010	43,569	32,972	2,075,704	188.53	47.64	-1.2	-5.7	-1.8	-.6
Wyo.....	1,121	4,172	3,220	159,931	142.67	38.33	0	-4.5	+9.5	+8.2

1/ All data subject to revision. 2/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of such adults were considered in determining the amount of assistance. 3/ Includes data on foster-family care; see table 10. 4/ Includes data on unemployed-parent segment; see table 8. 5/ Decrease of less than 0.05 percent. 6/ Increase of less than 0.05 percent. 7/ Data for May; June data not received.

TABLE 8. Aid to families with dependent children, unemployed-parent segment: Recipients and payments to recipients, June 1966[1]

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of families	Number of recipients		Payments to recipients			Percentage change from--			
		Total 2/	Children	Total	Average per		May 1966 in--		June 1965 in--	
					Family	Recipient	Number of recipients	Amount	Number of recipients	Amount
Total	53,821	317,066	218,302	$10,671,555	$198.28	$33.66	-9.1	-9.3	-18.3	-11.1
Ariz	1	10	9	220	(3/)	(3/)	(3/)	(3/)	(4/)	(4/)
Calif	18,214	107,014	73,915	3,685,700	202.36	34.44	-8.1	-11.9	+24.3	+34.3
Colo	319	1,883	1,268	75,457	236.54	40.07	-10.8	-7.9	(4/)	(4/)
Conn	828	5,015	3,404	156,189	188.63	31.14	-7.8	-5.5	-49.2	-40.6
Del	155	906	622	26,204	169.06	28.92	-26.1	-25.8	-30.5	-25.1
Hawaii	228	1,513	1,057	53,076	232.79	35.08	-6.7	-6.6	-6.0	+13.9
Ill	3,335	22,186	15,681	812,659	243.68	36.63	-9.4	-11.3	-38.9	-45.7
Kans	246	1,605	1,121	61,916	251.69	38.58	-15.6	-11.4	-33.6	-27.6
Mi	253	1,534	1,035	53,098	209.87	34.61	-12.8	-12.6	-25.3	-10.2
Mass	590	3,350	2,289	159,234	269.89	47.53	-5.3	-2.8	-8.2	(5/)
Mich	1,820	11,818	8,250	344,799	189.45	29.18	-10.9	-14.8	-39.8	-44.6
Nebr	35	224	155	5,207	(3/)	(3/)	-36.4	-27.3	(4/)	(4/)
N. Y	10,791	61,744	42,520	2,526,554	234.14	40.92	-8.7	-2.4	-28.1	-11.9
Ohio	3,339	19,927	13,720	643,430	192.70	32.29	-10.7	-8.4	-29.6	-18.6
Okla	55	334	228	10,681	194.20	31.98	-17.7	-14.8	+142.0	+199.4
Oreg	1,063	5,575	4,039	192,879	181.45	34.60	-20.2	-20.7	+9.2	+8.8
Pa	2,427	14,385	9,718	332,609	137.05	23.12	-16.0	-18.9	-54.3	-52.2
R. I	260	1,567	1,063	56,556	217.52	36.09	-1.8	-14.2	-28.5	-23.2
Utah	901	4,958	3,454	126,398	140.29	25.49	-5.3	-4.9	-8.9	+15.7
Wash	1,199	6,566	4,826	112,889	94.15	17.19	-21.4	-32.1	-53.2	-67.3
W. Va	7,762	44,952	29,930	1,235,800	159.21	27.49	-4.5	-5.4	-14.9	-13.8

1/ Data for this segment of the program, shown separately here, are included in data for the total program. All data subject to revision. 2/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of such adults were considered in determining the amount of assistance. 3/ Average payment not computed on fewer than 50 families; percentage change on fewer than 100 recipients. 4/ No program in operation in June 1965. 5/ Decrease of less than 0.05 percent.

TABLE 9. Aid to families with dependent children: Recipients and money payments to recipients under community work and training programs, by State, June 1966[1]

State	Number of families with an adult on work and training programs	Number of recipients				Money payments to recipients			
		Total 2/	Adults		Children	Total	For work performed on work and training programs	Average per family	
			On work and training programs	Other				Total	For work performed on work and training programs
Total	14,984	84,724	14,981	12,780	56,963	$2,651,381	$2,047,911	$176.95	$136.67
Calif	3,373	17,209	3,370	2,545	11,294	761,838	348,648	225.86	103.36
Colo	223	1,357	223	217	917	50,601	14,382	226.91	64.49
Ill	876	5,354	876	723	3,755	188,919	153,020	215.66	174.68
Kans	86	591	86	67	438	22,410	8,716	260.58	101.35
Mi	26	161	26	25	110	4,917	3,688	(3/)	(3/)
Mich	(4/)	(4/)	(4/)	(4/)	(4/)	(4/)	(4/)	(4/)	(4/)
Ohio	2,216	12,689	2,216	1,537	8,936	491,673	417,209	221.87	188.27
Oreg	49	272	49	37	186	10,029	3,692	(3/)	(3/)
Pa	337	1,927	337	333	1,257	61,555	41,117	182.66	122.01
Wash	36	212	36	36	140	6,300	4,300	(3/)	(3/)
W. Va	7,762	44,952	7,762	7,260	29,930	1,053,139	1,053,139	135.68	135.68

1/ Represents data for community work and training programs under plans for such programs submitted under Section 409 of Social Security Act. These data are included in data for the total program and for the unemployed-parent segment. All data subject to revision. 2/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of such adults were considered in determining the amount of assistance. 3/ Average payment not computed on base of fewer than 50 families. 4/ Data not received.

TABLE 10. Aid to families with dependent children receiving foster care: Recipients and payments for foster care, by State, June 1966[1]

State	Number of--			Payments for foster care				
	Children receiving foster care			Families from which children were removed	Total amount	Average per child	In foster homes	In institutions
	Total	In foster homes	In institutions					
Total.....	8,079	2/ 6,374	2/ 300	3,423	$654,619	$81.03	2/$438,890	2/ $45,211
Ala.....	0	0	0	0	0	---	0	0
Alaska.....	82	82	0	34	7,331	89.40	7,331	0
Ariz.....	200	200	0	83	9,169	45.84	9,169	0
Calif.....	1,507	1,381	126	717	137,564	91.28	113,798	23,766
Ill.....	1,405	(2/)	(2/)	572	170,518	121.37	(2/)	(2/)
Ind.....	144	144	0	50	5,686	39.49	5,686	0
Kans.....	137	136	1	59	13,251	96.72	12,903	348
Ky.....	33	33	0	10	2,280	(3/)	2,280	0
La.....	696	639	57	283	50,535	72.61	44,854	5,681
Md.....	1,010	978	32	333	82,419	81.60	77,903	4,516
Mich.....	96	85	11	32	7,710	80.31	6,616	1,094
Minn.....	219	184	35	103	21,986	100.39	14,281	7,705
Mo.....	85	85	0	20	4,800	56.47	4,800	0
Nebr.....	38	38	0	18	2,468	(3/)	2,468	0
N. Mex.....	90	90	0	19	4,791	53.23	4,791	0
N. C.....	24	24	0	9	1,417	(3/)	1,417	0
Okla.....	372	372	0	289	19,176	51.55	19,176	0
Oreg.....	161	161	0	69	10,714	66.55	10,714	0
Tenn.....	387	352	35	134	25,012	64.63	23,094	1,918
Utah.....	407	407	0	190	20,914	51.39	20,914	0
Va.....	76	76	0	23	3,486	45.87	3,486	0
Wash.....	584	584	0	249	33,965	58.16	33,965	0
W. Va.....	139	136	3	52	7,457	53.65	7,274	183
Wis.....	187	187	0	75	11,970	64.01	11,970	0

1/ Data for this segment of the program, shown separately here, are included in data for the total program. All data subject to revision. 2/ Excludes Illinois; breakdown not available. 3/ Average payment not computed on base of fewer than 50 children.

TABLE 11. Medical assistance: Recipients and payments for recipients, June 1966[1]

State	Number of recipients	Payments for recipients	
		Total amount	Average
Total, 8 States 2/.....	(3/)	$97,188,695	---
Total, 7 States reporting completely.	642,923	$48,099,727	$74.81
Calif.....	(3/)	49,088,968	---
Hawaii.....	5,457	664,558	121.78
Ill.....	224,750	8,544,544	38.02
Minn.....	66,764	6,331,775	94.84
N. Y. 4/.....	212,559	20,681,188	97.30
N. Dak.....	6,715	724,541	107.90
Okla.....	38,828	3,871,801	99.72
Pa.....	87,850	7,281,320	82.88

1/ Program initiated January 1966 under Public Law 89-97. All data subject to revision.
2/ Data not reported by Puerto Rico.
3/ Number of recipients not reported by California.
4/ Program in operation; plan not yet approved.

TABLE 12. General assistance: Recipients and payments for recipients, by State, June 1966[1]

[Excludes vendor payments for medical care and cases receiving only such payments]

State	Number of--		Payments to recipients			Percentage change from--			
				Average per--		May 1966 in--		June 1965 in--	
	Cases	Recipients	Total amount	Case	Recipient	Number of recipients	Amount	Number of recipients	Amount
Total 2/	286,000	592,000	$20,764,000	$72.70	$35.09	-2.9	+0.3	-10.9	-0.1
Ala.	86	87	1,108	12.88	12.74	(3/)	(3/)	(3/)	(3/)
Alaska	246	872	15,820	64.31	18.14	-.6	+1.4	+32.1	+46.2
Ariz.	2,100	5,270	118,734	56.54	22.53	+.7	-1.0	+4.9	+2.0
Ark.	306	1,078	4,386	14.33	4.07	-8.6	-5.5	+9.3	+3.1
Calif.	21,872	36,127	1,385,628	63.35	38.35	+1.9	+3.1	+14.5	+13.2
Colo.	818	3,158	47,294	57.82	14.98	-1.4	+2.0	-37.2	-25.1
Conn.	4/ 3,925	4/ 11,571	4/ 279,933	71.32	24.19	-.7	+.1	-7.6	-15.6
Del.	1,456	2,829	79,322	54.48	28.04	-1.7	-4.1	+5.8	-3.6
D. C.	962	1,034	74,861	77.82	72.40	+3.3	+3.7	+20.2	+23.3
Fla. 5/	8,100	(6/)	238,000	---	---	---	---	---	---
Ga.	2,331	5,475	73,707	31.62	13.46	-1.2	-1.4	+12.8	+2.5
Guam	24	31	910	(3/)	(3/)	(3/)	(3/)	(3/)	(3/)
Hawaii	1,094	1,659	99,380	90.84	59.90	+1.5	-2.6	+36.5	+44.3
Ill.	19,861	42,881	1,666,369	83.90	38.86	-2.5	+.3	-16.5	-14.1
Iowa 5/	3,100	7,000	111,000	---	---	---	---	---	---
Kans.	2,247	4,607	176,174	78.40	38.24	-4.4	-3.5	-27.3	-7.0
Ky.	1,212	3,357	42,799	35.31	12.75	-13.7	-12.8	+14.3	+12.3
La.	6,756	7,422	353,624	52.34	47.65	-1.9	-1.4	-17.2	-16.5
Maine	1,955	5,948	81,392	41.63	13.68	-22.0	-21.9	-26.3	-25.3
Md.	8,343	9,239	655,835	78.61	70.99	+.5	+1.1	+.2	+15.1
Mass.	7,262	14,146	526,554	72.51	37.22	-.9	+8.4	-5.7	-5.2
Mich.	16,513	50,062	1,820,838	110.27	36.37	-6.9	+1.4	-9.9	+24.7
Minn.	6,674	19,183	549,024	82.26	28.62	-8.5	-4.9	-23.3	-20.8
Miss.	1,113	1,375	19,898	17.88	14.47	+3.1	-.2	-11.7	+6.5
Mo.	9,602	11,957	655,807	68.30	54.85	-4.3	-2.0	-6.2	-.2
Mont.	944	2,793	51,212	54.25	18.34	-12.7	-12.2	-9.5	-5.9
Nev. 7/	354	671	22,104	62.44	32.94	---	---	---	---
N. H.	639	2,085	39,734	62.18	19.06	-9.5	-14.9	-23.5	-23.2
N. J. 8/	9,012	27,335	1,061,216	117.76	38.82	-7.0	-11.6	-8.7	-9.7
N. Mex.	255	555	11,204	43.94	20.19	+5.7	+14.3	+6.1	-7.6
N. Y. 9/	51,793	110,499	5,050,691	97.52	45.71	+.2	+4.2	+.9	+15.1
N. C.	1,581	4,336	45,530	28.80	10.50	-14.6	+1.8	+8.1	+15.5
N. Dak.	290	1,159	15,985	55.12	13.79	-25.5	-29.9	-2.6	-10.4
Ohio	19,043	51,987	1,547,061	81.24	29.76	-.8	-2.4	-30.2	-5.9
Okla.	7,340	(6/)	104,182	14.19	---	---	+16.0	---	-18.6
Oreg.	3,361	(6/)	183,970	54.74	---	---	-5.6	---	-29.0
Pa.	29,461	35,921	1,988,328	67.49	55.35	-2.4	-3.1	-14.0	-10.1
P. R.	2,259	2,259	22,759	10.07	10.07	+56.0	+73.3	-9.9	-4.7
R. I.	2,738	6,865	198,255	72.41	28.88	+10.4	+23.7	+4.9	+16.7
S. C. 7/	1,146	1,305	35,984	31.40	27.57	---	---	---	---
S. Dak.	361	1,204	12,487	34.59	10.37	-21.6	-18.8	-5.1	+3.5
Tenn.	1,603	3,220	48,064	29.98	14.93	-3.6	+2.5	-1.2	-9.1
Tex. 10/	8,300	(6/)	247,000	---	---	---	---	---	---
Utah	634	755	40,862	64.45	54.12	-1.4	+2.7	-84.3	-66.8
Vt. 10/	1,200	(6/)	30,000	---	---	---	---	---	---
V. I.	196	205	7,550	38.52	36.83	+1.0	+1.3	-5.1	-.7
Va.	2,856	6,726	154,079	53.95	22.91	-9.1	+1.2	+1.9	+16.1
Wash.	6,281	9,664	467,293	74.40	48.35	-.9	-2.5	-22.1	-17.9
W. Va.	1,572	2,633	55,704	35.44	21.16	+7.7	+1.0	-2.2	-12.2
Wis.	5,155	15,788	448,674	87.04	28.42	-7.2	-6.2	-15.1	-17.6
Wyo.	273	884	19,096	69.95	21.60	-30.8	-25.7	-23.5	-22.1

1/ All data subject to revision. 2/ Partly estimated; does not represent sum of State figures because totals exclude for New Jersey an estimated number of cases and persons receiving only medical care, hospitalization, and/or burial and payments for such services; recipient count also includes an estimate for States not reporting such data. Excludes Idaho, Indiana, and Nebraska; data not available. 3/ Average payment not computed on base of fewer than 50 recipients; percentage change on fewer than 100 recipients. 4/ About 7 percent of this total is estimated. 5/ Partly estimated. 6/ Data not available. 7/ Data for May; June data not received. 8/ Includes an unknown number of cases and persons receiving only medical care, hospitalization, and/or burial, and total payments for such services. 9/ Includes an unknown number of cases and persons receiving only medical care. 10/ Estimated on basis of reports from sample of local jurisdictions.

TABLE 13. Amount of vendor payments for medical care for recipients of public assistance, by program and State, June 1966[1]

State	Total 2/	Percentage change from--		Old-age assistance	Medical assistance for the aged	Aid to the blind	Aid to the permanently and totally disabled	Aid to families with dependent children	Medical assistance	General assistance 2/
		May 1966	June 1965							
Total...	$180,579,000	+9.1	+42.0	$29,423,404	$28,112,947	$548,420	$7,839,896	$7,179,282	3/$97,188,695	$10,286,000
Ala.....	1,589,016	+3.3	+25.5	1,416,094	90,049	4,218	78,303	352	(4/)	---
Alaska 5/...	133,667	-1.7	+4.0	28,222	(4/)	386	10,424	59	(4/)	94,576
Ariz.....	90,750	+2.5	+23.2	90,750	(4/)	---	---	---	(4/)	---
Ark. 5/.....	1,536,877	-.2	+17.5	955,015	209,061	24,650	260,150	54,802	(4/)	33,199
Calif.....	49,088,968	+27.9	+200.0	---	---	---	---	---	49,088,968	---
Colo.....	2,318,093	-10.8	+14.5	768,471	6/ 1,195,623	4,711	126,215	156,406	(4/)	66,667
Conn.....	2,690,281	+2.2	-3.4	146,601	6/ 1,763,031	12,305	299,411	468,933	(4/)	---
Del.....	50,140	-.1	-5.5	12,370	34,030	3,740	---	---	(4/)	---
D. C.....	422,661	-16.0	-14.4	79,074	301,028	405	38,331	2,305	(4/)	1,518
Fla. 5/.....	1,691,627	-11.6	-2.7	1,122,911	278,452	14,853	192,235	83,176	(4/)	---
Ga. 5/.....	1,550,281	+.9	+23.4	1,257,275	(4/)	16,447	209,593	66,966	(4/)	---
Guam.....	---	---	---	---	(7/)	---	---	---	(4/)	---
Hawaii 5/...	698,755	+1.4	+130.3	---	---	---	---	---	664,558	34,197
Idaho.....	549,028	+17.2	+30.3	79,467	444,028	90	25,443	---	(4/)	---
Ill. 5/.....	9,256,805	+8.9	+32.3	---	---	---	---	---	8,544,544	712,261
Ind.....	1,953,624	+.9	+29.6	1,098,132	271,753	63,766	181,860	338,113	(4/)	---
Iowa.....	2,162,894	+7.4	+2.5	1,108,753	409,193	20,423	78,251	213,274	(4/)	8/ 333,000
Kans. 5/.....	1,724,307	+3.9	+8.0	512,813	6/ 595,535	11,108	161,153	278,357	(4/)	165,341
Ky. 5/.....	1,858,016	+2.1	+5.4	826,056	500,253	23,994	199,302	308,411	(4/)	---
La.....	2,847,281	-9.7	+9.1	2,571,379	111,795	7,468	127,382	23,893	(4/)	5,364
Maine 5/....	732,715	-6.7	+10.3	345,056	199,309	3,658	60,314	36,358	(4/)	88,020
Md. 5/.....	1,781,813	+7.1	+110.2	533,327	641,070	7,721	257,037	338,021	(4/)	4,637
Mass.....	9,907,284	+3.3	+15.6	1,010,696	6/ 6,460,420	25,420	1,322,601	816,047	(4/)	272,100
Mich.....	8,007,036	-19.4	+54.6	691,132	4,765,371	11,199	223,892	202,594	(4/)	2,112,848
Minn.....	6,678,217	+4.6	+35.4	---	---	---	---	---	6,331,775	346,442
Miss.....	419,868	+59.3	+58.3	412,786	(4/)	7,082	---	---	(4/)	---
Mo.....	1,542,066	+3.8	+14.4	1,337,642	(4/)	---	99,155	68,568	(4/)	36,701
Mont.....	728,090	-3.3	+57.4	72,680	260,910	---	590	1,212	(4/)	392,698
Nebr. 5/....	1,443,899	+2.9	+35.5	532,893	6/ 594,304	24,936	196,989	94,777	(4/)	---
Nev. 9/.....	378,445	---	---	21,495	6/ 184,000	1,263	(4/)	11,218	(4/)	160,469
N. H.....	371,046	+3.6	+33.1	99,367	201,713	4,771	24,324	40,871	(4/)	---
N. J.....	3,024,386	+3.7	+20.5	348,380	6/ 1,775,618	12,847	282,090	382,006	(4/)	223,445
N. Mex. 5/..	523,431	-16.5	+255.0	257,300	32,846	9,775	114,775	99,742	(4/)	8,993
N. Y. 5/....	20,681,188	+14.2	+6.6	---	---	---	---	---	10/20,681,188	---
N. C.....	2,585,217	+53.5	+52.8	561,371	666,664	34,409	712,333	449,115	(4/)	161,325
N. Dak. 5/..	738,143	+3.9	+5.7	---	---	---	---	---	724,541	13,602
Ohio.....	4,637,676	+7.0	+8.3	2,141,172	(4/)	67,683	481,562	1,062,255	(4/)	885,004
Okla. 5/....	3,871,801	+37.2	+77.2	---	---	---	---	---	3,871,801	---
Oreg.....	1,263,161	-6.4	+11.7	179,431	608,717	9,071	192,655	188,476	(4/)	84,811
Pa.....	8,304,860	+13.8	+28.1	---	---	---	---	---	7,281,320	1,023,540
P. R. 5/....	---	---	---	---	---	---	---	---	(3/)	---
R. I. 5/....	1,031,835	-23.2	+23.1	89,011	753,583	1,786	49,078	77,002	(4/)	61,375
S. C. 5/....	836,929	---	---	440,980	247,990	16,890	104,082	19,627	(4/)	7,360
S. Dak.....	381,162	-11.0	+12.4	158,775	83,195	537	24,921	---	(4/)	113,734
Tenn.....	1,325,872	-2.2	+24.5	661,710	482,737	5,787	72,845	102,793	(4/)	---
Tex.....	3,196,522	-9.7	+10.1	3,196,522	(4/)	---	---	---	(4/)	---
Utah.....	666,947	+5.1	+19.0	71,895	289,967	4,067	178,279	120,248	(4/)	2,491
Vt. 5/.....	377,679	+9.0	+13.2	286,287	42,906	1,421	47,065	---	(4/)	---
V. I.....	8,006	+373.7	+4.7	1,269	6,342	3	47	159	(4/)	186
Va.....	1,117,955	+39.2	+53.9	335,309	519,275	16,884	133,501	79,649	(4/)	33,337
Wash.....	3,331,465	-.3	-6.6	656,746	1,587,932	17,430	631,728	314,246	(4/)	123,383
W. Va.....	1,088,288	-6.3	+2.3	193,950	368,321	11,169	85,374	397,224	(4/)	32,250
Wis.....	4,857,272	+.1	+13.5	2,659,131	1,095,861	43,328	546,491	274,193	(4/)	238,268
Wyo.....	149,291	-7.8	+9.8	53,708	40,065	719	10,115	7,834	(4/)	36,850

1/ All data subject to revision. 2/ Data incomplete for general assistance. Some States do not report these data and for some the data represent only partial reporting. The total includes an estimated amount for these States. 3/ Data not reported by Puerto Rico. 4/ No program in operation. 5/ Except for aid to families with dependent children and general assistance, data represent payments for recipients of the specified type of assistance under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 6/ Excludes small amount of money payments not subject to Federal participation. 7/ Program in operation but no payments made in June 1966. 8/ Partly estimated. 9/ Data for May; June data not received. 10/ Program in operation; plan not yet approved.

TABLE 14. Average payment per recipient for all assistance, for money payments, and for vendor payments for medical care, by program and State, June 1966[1]

State	Old-age assistance			Medical assistance for the aged	Aid to the blind			Aid to the permanently and totally disabled			Aid to families with dependent children (per recipient)			Medical assistance
	All assistance	Money payments to recipients	Vendor payments for medical care		All assistance	Money payments to recipients	Vendor payments for medical care	All assistance	Money payments to recipients	Vendor payments for medical care	All assistance	Money payments to recipients	Vendor payments for medical care	
Total.....	$77.47	$63.50	$13.96	$145.12	$89.91	$83.46	$6.45	$81.35	$68.02	$13.33	$34.86	$33.27	$1.59	2/ $74.81
Ala.....	71.08	58.45	12.64	325.09	68.93	66.66	2.27	50.35	45.10	5.25	12.70	12.69	(3/)	(4/)
Alaska 5/....	90.23	69.70	20.53	(4/)	85.75	82.11	3.64	108.99	72.02	36.96	35.13	35.12	.01	(4/)
Ariz.....	62.45	55.65	6.80	(4/)	71.92	71.92	---	66.70	66.70	---	28.34	28.34	---	(4/)
Ark. 5/.....	66.90	51.20	15.69	66.26	74.08	61.12	12.96	83.18	56.85	26.33	17.79	16.08	1.71	(4/)
Calif.....	96.86	96.86	---	---	128.65	128.64	---	107.98	107.98	---	43.47	43.47	---	(2/)
Colo.....	97.36	79.04	18.32	6/199.30	93.35	72.51	20.85	81.18	62.13	19.05	40.03	36.80	3.24	(4/)
Conn.....	90.18	63.76	26.42	6/209.24	106.76	65.05	41.71	78.14	45.84	32.30	49.76	41.26	8.51	(4/)
Del.....	69.65	61.62	8.04	147.32	89.69	78.69	11.00	84.85	84.85	---	30.40	30.40	---	(4/)
D. C.....	98.20	63.52	34.68	346.01	76.78	74.74	2.05	86.38	75.63	10.76	33.34	33.24	.10	(4/)
Fla. 5/.....	64.76	50.24	14.51	332.28	68.82	63.10	5.72	68.55	58.67	9.87	15.91	15.24	.68	(4/)
Ga. 5/.....	60.64	47.17	13.48	---	62.18	57.03	5.16	63.23	55.74	7.49	24.30	23.50	.80	(4/)
Guam.....	35.42	35.42	---	(7/)	(8/)	(8/)	---	(8/)	(8/)	---	15.65	15.65	---	(4/)
Hawaii 5/....	73.69	73.69	---	---	87.03	87.03	---	90.93	90.93	---	40.75	40.75	---	121.78
Idaho.....	82.80	61.65	21.15	153.27	69.04	68.25	.79	58.31	50.34	7.97	39.52	39.52	---	(4/)
Ill. 5/.....	54.08	54.08	---	---	69.13	69.13	---	73.55	73.55	---	40.05	40.05	---	38.02
Ind.....	97.57	45.67	51.90	184.99	99.77	62.06	37.71	138.69	46.42	92.27	33.14	26.29	6.84	(4/)
Iowa.....	96.93	54.56	42.36	86.93	108.18	88.90	19.29	110.64	60.35	50.29	40.85	36.30	4.55	(4/)
Kans. 5/.....	95.99	69.97	26.02	6/159.96	101.57	77.68	23.89	122.25	92.29	29.96	40.32	32.91	7.41	(4/)
Ky 5/.....	63.85	49.90	13.94	38.08	75.04	65.50	9.53	80.31	64.42	15.88	26.63	23.00	3.64	(4/)
La.....	85.56	65.78	19.79	193.08	80.61	77.76	2.85	60.73	54.64	6.09	23.97	23.75	.22	(4/)
Maine 5/.....	83.25	51.26	32.00	295.71	89.03	73.53	15.50	96.63	70.14	26.49	31.56	29.69	1.87	(4/)
Md. 5/.....	94.06	42.98	51.08	44.58	89.26	67.93	21.33	96.06	66.29	29.76	39.53	35.78	3.75	(4/)
Mass.....	101.10	80.80	20.30	6/199.01	146.35	135.17	11.17	169.89	76.80	93.09	51.01	43.47	7.54	(4/)
Mich.....	83.89	66.79	17.11	359.00	87.93	80.72	7.22	104.20	89.28	14.92	35.57	34.28	1.29	(4/)
Minn.....	53.13	53.13	---	---	70.55	70.55	---	69.02	69.02	---	46.70	46.70	---	94.84
Miss.....	45.31	39.72	5.59	(4/)	48.84	45.96	2.87	45.51	45.51	---	7.89	7.89	---	(4/)
Mo.....	76.51	62.94	13.58	(4/)	80.00	80.00	---	78.79	72.47	6.33	25.74	25.11	.64	(4/)
Mont.....	80.26	63.12	17.13	138.34	73.24	73.24	---	69.35	68.94	.41	36.66	36.52	.14	(4/)
Nebr. 5/.....	95.19	44.67	50.53	6/201.39	108.47	58.89	49.57	114.34	52.33	62.00	32.78	27.87	4.91	(4/)
Nev. 9/.....	82.24	72.96	9.29	6/403.51	105.18	97.29	7.89	(4/)	(4/)	(4/)	32.35	30.35	2.00	(4/)
N. H.....	110.12	86.69	23.42	81.47	115.92	96.38	19.55	119.49	83.45	36.04	46.96	38.98	7.97	(4/)
N. J.....	89.55	64.61	24.95	6/278.27	93.54	79.31	14.23	105.96	74.78	31.19	51.44	48.20	3.24	(4/)
N. Mex. 5/...	83.77	57.17	26.60	164.23	99.42	71.65	27.77	97.06	69.67	27.39	32.79	29.64	3.15	(4/)
N. Y. 5/.....	71.85	71.85	---	---	92.30	92.30	---	83.17	83.17	---	48.48	48.48	---	10/ 97.30
N. C.....	68.45	54.95	13.50	133.55	75.53	68.37	7.16	87.82	58.26	29.56	26.90	22.92	3.97	(4/)
N. Dak. 5/...	64.24	64.24	---	---	73.02	73.02	---	73.91	73.91	---	40.42	40.42	---	107.90
Ohio.....	94.89	67.91	26.97	(4/)	95.18	73.19	21.98	92.56	69.02	23.54	35.74	30.21	5.53	(4/)
Okla. 5/.....	76.47	76.47	---	---	104.29	104.29	---	94.73	94.73	---	34.00	34.00	---	99.72
Oreg.....	73.67	54.82	18.86	144.04	97.60	79.60	18.00	71.66	49.30	22.35	40.62	35.17	5.45	(4/)
Pa.....	69.67	69.67	---	---	106.98	106.98	---	71.55	71.55	---	31.72	31.72	---	82.88
P. R. 5/.....	8.69	8.69	---	---	8.71	8.71	---	8.78	8.78	---	4.11	4.11	---	(2/)
R. I. 5/.....	99.70	83.17	16.54	73.18	106.57	90.04	16.54	96.98	80.45	16.54	42.50	39.30	3.19	(4/)
S. C. 9/.....	57.90	39.43	18.47	183.70	62.46	53.52	8.95	56.61	45.35	11.25	15.94	15.21	.73	(4/)
S. Dak.....	77.62	52.24	25.38	138.66	73.40	68.48	4.93	80.98	60.16	20.82	33.93	33.93	---	(4/)
Tenn.....	61.21	46.21	15.00	40.35	60.50	57.50	3.00	60.50	55.50	5.00	24.60	23.35	1.24	(4/)
Tex.....	76.53	62.51	14.02	(4/)	71.59	71.59	---	59.00	59.00	---	21.35	21.35	---	(4/)
Utah.....	72.05	55.47	16.57	117.73	80.96	56.16	24.80	76.41	40.47	35.94	36.23	31.27	4.95	(4/)
Vt. 5/.....	101.56	46.80	54.76	234.46	74.75	62.28	12.46	97.27	60.38	36.88	29.07	29.07	---	(4/)
V. I.....	40.68	37.69	2.99	44.04	(8/)	(8/)	(8/)	(8/)	(8/)	(8/)	20.13	20.00	.13	(4/)
Va.....	73.39	47.04	26.35	92.88	77.28	62.47	14.81	77.60	58.33	19.26	26.28	24.60	1.68	(4/)
Wash.....	78.50	56.45	22.05	150.22	87.79	61.54	26.25	63.73	30.63	33.10	35.56	30.66	4.90	(4/)
W. Va.....	59.50	44.69	14.81	30.21	60.00	45.05	14.95	57.09	42.29	14.80	27.46	23.55	3.91	(4/)
Wis.....	124.47	29.02	95.45	142.84	108.55	50.63	57.93	132.05	35.75	96.30	47.64	41.35	6.29	(4/)
Wyo.....	92.09	68.98	23.11	(8/)	84.02	69.92	14.10	83.39	69.63	13.76	38.33	36.46	1.88	(4/)

1/ Averages based on cases receiving money payments, vendor payments for medical care, or both. Money payments may also include small amounts for assistance in kind and vendor payments for other than medical care. Averages for general assistance not computed because of difference among States in policy or practice regarding use of general assistance funds to pay medical bills for recipients of the special types of public assistance. 2/ Data not reported by Puerto Rico and California. 3/ Less than 1 cent. 4/ No program in operation. 5/ Except for aid to families with dependent children and medical assistance, data for each program represent average payments for recipients of the specified type of assistance under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 6/ Excludes small amount of money payments not subject to Federal participation. 7/ Program in operation but no payments made in June 1966. 8/ Average payment not computed on base of fewer than 50 recipients. 9/ Data for May; June data not received. 10/ Program in operation; plan not yet approved.

Old-age, survivors, and disability insurance benefits, summary data, June 1966

CURRENT MONTH DATA

Type of Benefit	Benefits awarded in month		Benefits awarded in current-payment status, end of month			Amount of benefits paid 1/ in month (in thousands)
	Number	Average amount	Number	Monthly rate (in thousands)	Average amount	
Total, OASI and DI	484,292	---	---	---	---	$1,681,870
Total, OASI	433,045	---	---	---	---	1,536,760
Monthly benefits, OASI and DI	382,313	---	21,737,260	$1,580,997	---	1,660,512
Monthly benefits, OASI	331,066	---	19,850,616	1,451,145	---	1,515,402
Monthly benefits, DI	51,247	---	1,886,644	129,853	---	145,110
Old-age (retired-worker)	192,914	$93.77	11,460,612	963,550	$84.07	984,566
Disability (disabled-worker)	22,702	101.34	1,050,459	102,911	97.97	113,632
Wife's or husband's (OASI and DI)	43,947	44.77	2,850,329	122,650	43.03	127,889
Wife's or husband's (OASI)	37,220	46.44	2,641,417	115,467	43.71	119,148
Wife's or husband's (DI)	6,727	35.55	208,912	7,183	34.38	8,741
Widow's or widower's	30,928	71.51	2,503,423	184,901	73.86	199,628
Parent's	266	82.61	34,879	2,657	76.18	2,968
Child's (OASI and DI)	81,637	---	3,358,057	173,178	---	196,246
Child's (OASI--total)	59,819	---	2,730,784	153,419	---	173,509
Child's (OASI--life) 2/	16,677	36.97	506,378	16,611	32.80	18,618
Child's (OASI--survivor) 2/	43,142	62.18	2,224,406	136,808	61.50	154,891
Child's (DI)	21,818	32.41	627,273	19,759	31.50	22,737
Mother's	9,919	68.09	479,501	31,150	64.96	35,583
Lump-sum death payments	101,979	3/ 223.86	---	---	---	21,358

COMPARATIVE DATA

Item	June 1966	May 1966	June 1965
Number of benefits in current-payment status, end of month:			
Total, OASI and DI	21,737,260	21,633,212	20,156,883
Total, OASI	19,850,616	19,761,359	18,508,707
Total, DI	1,886,644	1,871,853	1,648,176
Amount of benefits paid (in thousands):			
Total, OASI and DI	$1,681,870	$1,687,404	$1,429,273
Total, OASI	1,536,760	1,541,331	1,302,972
Total, DI	145,110	146,073	126,301
Number of old-age (retired-worker) benefits:			
Awarded	192,914	269,484	99,667
In current-payment status, end of month	11,460,612	11,394,253	10,842,620
Average old-age (retired-worker) benefit:			
Awarded	$93.77	$96.62	$82.50
In current payment-status, end of month	84.07	84.09	77.98
Number of disability insurance (disabled-worker) benefits:			
Awarded	22,702	23,000	23,947
In current-payment status, end of month	1,050,459	1,042,288	943,672
Average disability insurance (disabled-worker) benefit:			
Awarded	$101,34	$101.40	$93.75
In current-payment status, end of month	97.97	97.94	91.14
Number of persons aged 62 and over receiving monthly benefits, end of month (OASI and DI) 4/	16,624,000	16,537,000	15,769,000
Number of persons aged 65 and over receiving monthly benefits, end of month (OASI and DI) 4/	14,646,000	14,578,000	13,884,000
Assets of trust funds, end of month (in millions):			
OASI	$19,872	$19,349	$20,180
DI	1,688	1,692	2,007
HI (hospital insurance)	851	661	---

1/ Exceeds monthly amount of benefits in current-payment status because initial payments include amounts payable for prior months. Distribution by type of monthly benefit estimated.
2/ Distribution by type of claim for OASI child's benefits estimated.
3/ Average lump sum per worker; there were 95,405 deceased workers represented in the current month's lump-sum awars.
4/ Numbers estimated to the nearest thousand.

Source: Division of the Actuary, Social Security Administration.

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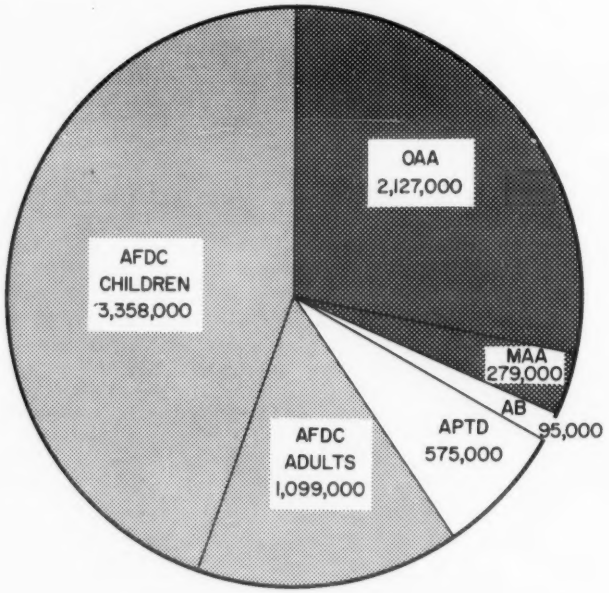
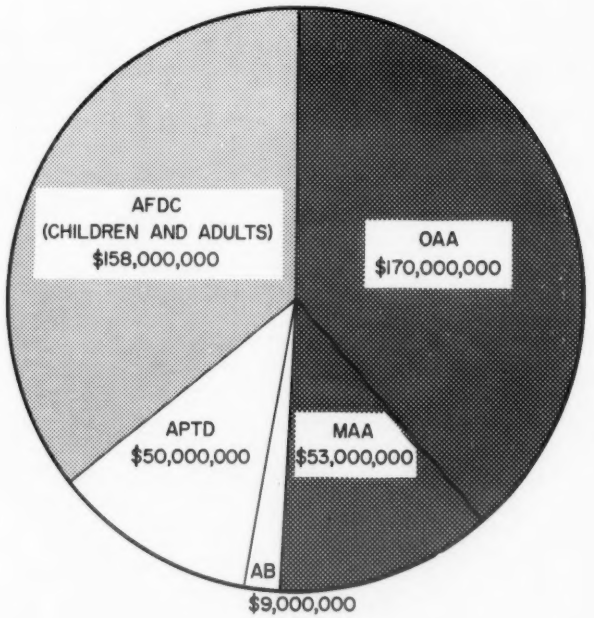
DISTRIBUTIONS OF RECIPIENTS AND ASSISTANCE PAYMENTS, BY PROGRAM, FOR THE SPECIAL TYPES OF PUBLIC ASSISTANCE, DECEMBER 1965

RECIPIENTS



TOTAL: 7,533,000

ASSISTANCE PAYMENTS



TOTAL: $440,000,000

DEPARTMENT OF
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